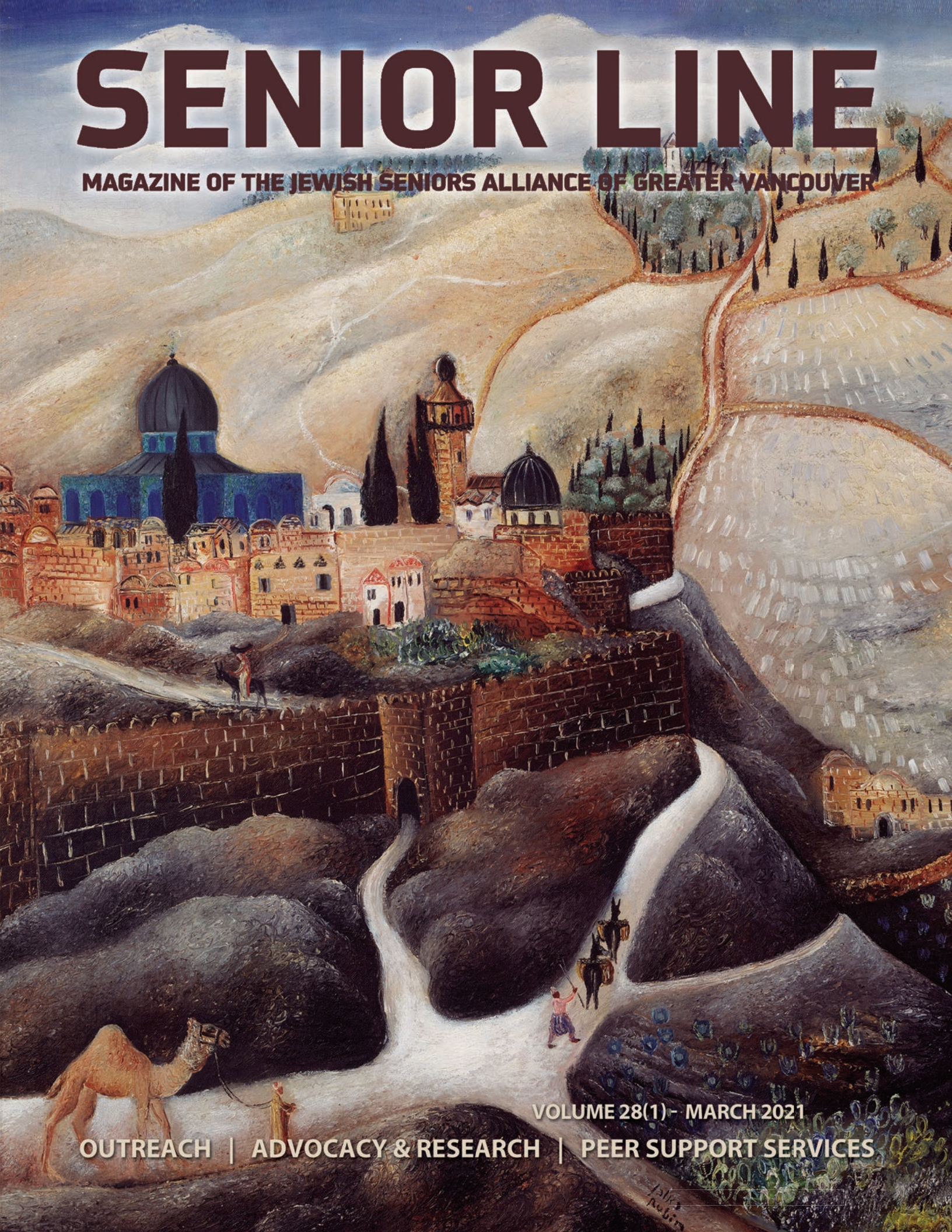


# SENIOR LINE

MAGAZINE OF THE JEWISH SENIORS ALLIANCE OF GREATER VANCOUVER



VOLUME 28(1) - MARCH 2021

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We share our thoughts about who you are and what you have accomplished.

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Volunteers, donors and philanthropists  
Educators, authors, thinkers and healers.  
Mothers, Fathers, Grandparents,  
Aunts, Uncles, Cousins & Friends  
Retainers of our community's collective wisdom.

*You Are*



We honour the memory of our parents Harriet and Arnold Shine<sup>z1</sup>, Babs and Ted Cohen<sup>z1</sup>  
~ Gary and Linda Cohen



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## CO-PRESIDENTS' MESSAGE

# REMEMBER ALL THE THINGS THAT HAVE NOT BEEN CANCELLED

Written by Larry Shapiro and Gyda Chud

**D**ear Senior Line Reader, There is no doubt that the current pandemic in which we find ourselves living has altered all of our lives to a greater or lesser degree. The great majority of seniors with whom I am in contact are behaving in a vigilant manner in a concentrated effort to reduce their risk of exposure to this potentially fatal virus. As a result of this new ultra-cautionary lifestyle, we are necessarily spending much more time at home and have had to adapt to changes in many of our pre-Covid-19 activities.

### DOING THINGS DIFFERENTLY

For example, grocery shopping in a safe manner has caused us to either have our food orders delivered or drive to specific supermarkets, where, our groceries, which have been previously ordered online, are brought to our vehicle and placed in our open trunk by store employees. On returning home, many of us have developed the habit of washing our produce with soap and water and disinfecting cans, jars and boxes before putting them away.

Frequenting restaurants has given way to picking up or having delivered our favorite culinary delights. Movies, plays, exhibitions and all other forms of public entertainment have had to either cancel their offerings or find another venue that offers a safe environment like streaming

or television. Conferences, meetings, seminars and any other previously available interests we have that, in pre-Covid-19 times, were held in groups of human beings gathered together for a designated purpose, are now confined to Zoom-type platforms or teleconference group events. Personally, I find myself spending no less than ten hours per week on Zoom. I can't imagine what I would do in order to accomplish what I do on that platform, if it was not readily available.

Socializing, whether it be an intimate house party with close friends or more elaborate events like weddings, *bar mitzvahs*, social events and celebrations are no longer feasible. Even funerals and *shivahs* as we know them have ceased.

And so it seems that everything from visiting the barber or hairdresser, exercising at a gym, participating in a variety of programs and activities at local community centres and even those delightful visits with our children and grandchildren have been necessarily put on hold for the time being.

### SO MANY THINGS THAT CAN BE DONE

The list goes on, but rather than lamenting over and brooding about all that has been temporarily cancelled, let's count some of the things that have not been cancelled. Sunshine has not been cancelled. Having religiously followed an exercise program at the JCC, we now follow a variety of yoga and exercise classes on the Internet and never miss

the chance to go for hour-long walks when the sun shines.

Reading has not been cancelled. We have found more time, being at home self isolating, to catch up with lots of reading material that has accumulated faster than I am able to consume it. Music has not been cancelled. With all that is readily available and easily accessible on the internet, treat yourself to the works of your favorite artists and in the process, perhaps discover new talent in all genres of music. Maybe it is the ideal time to get out those cassette tapes that you once treasured and reminisce.



Hope is the most important thing we can share in our conversations with others.

Conversations have not been cancelled. We, who enjoy the benefit of having someone with whom to talk and share our stories have no idea how the restrictions and subsequent self-isolation affect those who live alone with no social support at all. Pick up the phone, readers, and talk with these lonely people who are basically living in a state of solitary confinement, and when I say talk, I mean converse in order to give them an opportunity to express how they are feeling about the

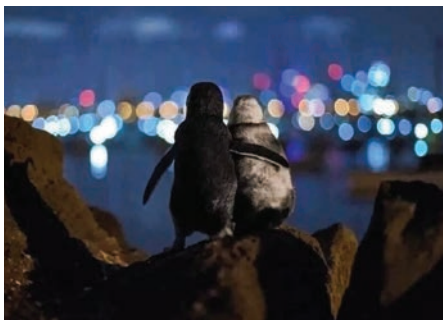
**Continued on page 7...**

# JUST KEEP ON MARCHING AS LONG AS YOU HEAR THE MUSIC

Written by Dolores Luber

One year and counting—that is how long we have been experiencing the effects of the Pandemic—Covid-19. I heave a sigh of relief. Only one person I know has been ill with the virus, and she is doing well. You will read Gloria Levy’s story in this magazine. Have I experienced fear? Yes. Frustration? Yes. Impatience? But not boredom, anxiety or loss of motivation. No. I have maintained my energy level; what is the secret? Why is that? Upon reflection, I realize that it is because I was able to remain flexible. No, not flexible as in body flexibility, flexible as in mentally and spiritually “bending with the wind.” Flexibility is the ability to change or be changed easily according to the situation.

Binny Goldman is a perfect example of being flexible. Confined mostly to her home, she has created a brand-new tradition of researching, collecting and sending out by email inspiring, beautiful, funny, compassionate and educational videos, poems and postings, about five days a week! So, each morning, when members of the Board



Widowed penguins comfort each other - one of many inspirational pictures and videos shared by Binny Goldman.

and her friends open up their email account, we all receive these glorious messages—and smile for the first time in the day. Thank you, Binny, you are our Queen of Sunshine!

As for me, publishing three *Senior Line* editions during Covid-19 has been a challenge in adaptation, in accommodation, that is, in flexibility. No longer was there a two-page listing of current events and programs, no longer were there extensive reviews of Empowerment Series events, or the AGM, or the Fall Symposium. Yes, JSA was able to adapt and offer these activities on Zoom; but the coverage was necessarily much reduced in the magazine.

What I realized is that these changes were presenting me with an opportunity: To be inspired, to do research and to create new formats and topics for the magazine. The results have been noticed—the four-page personal and medical questionnaire to fill out and place on your refrigerator, *In Case of an Emergency*, was published. That led to the idea of a special “Centerpiece” article and Tony DuMoulin’s wonderful essay and photographs on *Walks around Vancouver*. We will now have a special Centerpiece topic in each issue. See *Exercise as Medicine* by Rita Roling in this edition. Of all the things you can do to rejuvenate your brain, regular physical activity confers the greatest benefits by a wide margin. I had the idea of not only writing about movies and documentaries, but also about



## EDITOR'S MESSAGE

directors who have contributed so much to our cultural knowledge and entertainment; the results: In depth analysis of the work of Bong Joon-ho, Clint Eastwood, and now Deepa Mehta. And we now have a new tradition, *The Great Debate* inaugurated by Ken Levitt and Larry Shapiro with their discussion on who should be responsible for the management of long-term care facilities in Canada, the Federal or Provincial Government—the tradition is soon to be continued with a new topic in the summer edition.

Stay flexible, do what you can!

## NEW MEANING FOR THE ANCIENT STORY OF PASSOVER DURING THE PANDEMIC

Each spring, Jews around the world celebrate Passover, a holiday that commemorates the Israelites’ escape from slavery in ancient Egypt. Passover calls on Jews to look back to a time of oppression that ended with a new beginning and a new path forward to find safer and better things ahead. But the gathering of friends and family around the *Sedar* table will not happen again this year, it will be a virtual affair.

We are now experiencing a plague. We have been confined and restricted in our movements and in our relationships

Continued on page 4...

# JUST KEEP ON MARCHING AS LONG AS YOU HEAR THE MUSIC

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...Continued from Page 3.

with family members and friends. This Passover is different, some traditions are being adapted or scuttled, for example, “A Different Pesach: Ideas for the Solo Seder” and “The Four Children and Covid-19” (type these titles into your search engine). Covid-19 requires you to stay in your home to make sure the plague will pass over your family and community. Although staying home may feel like inaction, we can use this time well, to reflect on the experience

in a personal way, the coming out from slavery (dependence, denial) into freedom. What parts of your life need to be changed? Should you refocus your priorities? Should you make changes in your lifestyle? Procrastination can be banished, you can initiate action and take this opportunity to be more flexible, to adapt to a new reality, to free yourself from addictions or dangerous lifestyles.

This Passover, we will celebrate in defiance of circumstances, even if we feel confined. Let us remind ourselves

that we are free and that freedom really is a state of mind. The Passover story reminds Jews that they have always overcome conflict and that this year will not be an exception.

**Special Note: Our advertisers support our magazine and our organization. Support them by patronizing their businesses and stores. Thank you.**

**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.

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## LETTERS TO THE EDITOR...

Write to Dolores at: [editor@jsalliance.org](mailto:editor@jsalliance.org)

---

I want to commend you and your group for all the great work you are doing to support seniors. You are a terrific role model and could be the “poster person” for how to live life after retirement!

**Joanne Archer**, RN BTECH MA,  
Education and Practice Coordinator,  
Provincial Infection Control Network  
(PICNet)

*Editor's note:* I think that the secret to life after retirement is to find meaning in one's activities, especially by small gifts of kindness.

---

Thank you so much for your well-written articles this past edition...especially the one about the “Political Poodles” of Israel.

**Gordon Cherry**

*Editor's note:* Gordon is a fellow poodle owner and Quincey, his miniature poodle is no pushover.

I just wanted to let you know how much I enjoy reading *Senior Line*. The articles are interesting and well-written. They are timely, for example *Who Should be Responsible for Long Term Care?* and *Covid-19 and its Psycho-Social effects on Older Adults*.

They highlight real people and their down-to-earth issues - for example, the volunteer profiles and *I lost My Mobility During Covid-19*. Then to round it out with cartoons and crossword puzzles. I'm also now watching a movie that you recommended.

Congrats and keep up the amazing work!

**Larry Barzelai, MD**

*Editor's note:* Larry is a family physician and a fellow Hebrew-language learner. Your comments encourage me to educate, advocate and amuse my senior readers. Thank you.

This has been a difficult month, the one thing that gives me hope are two magnificent clinical leaders, protecting older persons and health care workers. There is a human side to the story that must be told. They deliver a bouquet of flowers from children to a palliative senior. They ensure a daughter video chats with her parent. They make window visits happen. They ensure a wife is with her husband receiving end of life care, no one dies alone. They sit at the bedside, holding the hand of a COVID positive older person reciting a hymn, praying as a final breath is exhaled.

They cry, out of mental and physical exhaustion, not remembering their last day off, knowing so many health care workers are all working together to control the outbreak. The single mom who tested positive at home recuperating. The older persons at the care home quarantined for weeks, perhaps months. Life can throw at us unimaginable challenges, but the one thing that these exceptional women radiate is an ability to maintain hope for a brighter morning, even during the darkest nights. Knowing this, these unsung



heroes, wipe their tears away, don their PPE and lead Tabor Home by example.

I am proud to share that these extraordinary nurses are my heroes. I imagine they are also your heroes!

**Dan Levitt**

Executive Director of Tabor Village, Abbotsford.

*Editor's note:* Dan, we at JSA agree completely with your sentiments. We owe enormous gratitude to front-line workers.

---

Many many thanks, Dolores.

First, for another superb *Senior Line*. While we have become accustomed to the excellence that you produce, and yes there is always a treasure that comes to the fore when we open the magazine and delve into it. Dolores that is a gift you deprive yourself of, the joy of discovery...naturally...since you produce the magazine. However you can enjoy our reactions.

Secondly, may I also thank you for introducing me to *Diagnosis*, as I have always had a preference for stories with a medical thread and the discovery of this series is an especially apt gift for me. You do an incredible amount of research into all you produce.

Please stay well and do take care during your walks with Kesem...especially in our now 'distant' world which doesn't seem to leap to help someone who obviously needed it. You made that frightening scene come alive with your descriptive words in the *Jewish Independent* newspaper. Enjoy the sunshine today... we enjoy it through our many windows.

**Binny Goldman**

*Editor's note:* Dear Bin, I am always appreciative of the gracious feedback I receive from our readers. It makes all the effort worthwhile. Thank you.

I am emailing from the UK and hope that I am reaching the correct person. For quite a long time I have been looking for pen friends in the UK or an English speaking person. I am 88 years of age, widowed, mentally alert though physically not too good. Since the Covid-19 outbreak I feel more isolated than usual and would love to have contact with some new people. I am not too keen on 'social media' it can sometimes be used by scammers.

If there are any email penfriend(s) organizations you know, I would like to be informed if possible. If not, thank you for your time. I have visited Vancouver and loved my stay there.

**Minnie Russell-Harris**  
[minnieruss@ntlworld.com](mailto:minnieruss@ntlworld.com)

*Editor's note:* Dear Minnie, I am publishing your request in the hope that one or two of *Senior Line's* 4,000+ readers will respond to your request for a pen pal.

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I don't think we've met, but we have something in common—the same birthday! I enjoy your writing and your curiosity. I hope you have recovered from your recent fall. I read the *Senior Line* Magazine where I learned of our shared birthday, and the *Jewish Independent* where I learned of your very scary fall. Glad you are OK.

**Michelle Mina**

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I receive a lot of magazines in the mail and while embarrassed to admit it, throw many into recycling without even opening them. But not *Senior Line!* This is a most professional production. It is beautifully designed and full of content of considerable interest to me and no doubt many, many others. While preparing this letter, I discovered 27 back issues of the magazine are available on the [jsalliance.org](http://jsalliance.org) website under 'Outreach'. This should provide me

(and hopefully many others) with enough reading material until this awful pandemic is over. Congratulations to Dolores Luber and everyone else associated with *Senior Line*.

**Michael Geller** FCIP, RPP, MLAI, Retired Architect AIBC. Adjunct Professor, SFU Centre for Sustainable Development; Resource and Environmental Management Website: [www.michaelgeller.ca](http://www.michaelgeller.ca)

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## CORRECTION

In the article *Meet the Staff* [Volume 27-3] we introduced you to **Margot Beauchamp**. It was incorrectly stated that she has a MSW. Margot has a teaching degree from Simon Fraser University.

We forgot to tell you exactly what her role is at JSA. Margot was hired as JSA's Quality Assurance Liaison which entails designing, collecting and interpreting quantitative data and qualitative information about the impact of various JSA programs. This information is used to monitor and evaluate the services provided under a Community Health Services Agreement with Vancouver Coastal Health contract to improve the socialization, connectedness of seniors and deliver various education programs.

## JSA WELCOMES NEW SUPPORTERS

---

### NEW LIFETIME MEMBER

Evelyn Kahn  
Vicky Steinberg

### NEW MEMBER/SUPPORTER

Deborah Roitberg & Jack Amar  
Aida Davis  
Sylvie Hutchinson  
Birgit Millman  
Michelle & Eli Mina  
Frank Norman  
Jeanette Roitberg  
Norma Saltzberg



**SERGE HABER'S MESSAGE**

# JEWISH SENIORS ALLIANCE: A ROCKY START AND A SOLID FOUNDATION, PART 1

Written by Serge Haber

Dear Friends,  
Much to my surprise, in speaking to one of our kind donors, I found out that even some of these donors don't know very much about the Jewish Seniors Alliance of Greater Vancouver (JSA). The donations that were given to us were given in good faith and because I asked for them. So I thought that with my advanced age, it is a very good opportunity for me to tell the story of JSA, the environment in the Jewish and non-Jewish population and the motivation for starting an organization like JSA in 2003.

My arrival to Vancouver on December 15, 1978, more than 40 years ago, was at a time yielding tremendous changes and growth in the Jewish Community and the City of Vancouver. I became a member of Congregation Beth Israel and became involved on the Board and with the Mens' Club, for the next nineteen years. I witnessed the retirement of Rabbi Wilfred Solomon, several other Rabbis that came in, and the loss of almost 200 members, in a period of five or six years.

In 1987 I became the president of the non-functioning organization of B'nai Brith Hillel Foundation at the University of British Columbia. We engaged Dr. Mordechai Wosk as Executive Director who developed wonderful relations with the student body. I put my attention to developing a functioning board and organization which became what is today,

a proud organization on the grounds of UBC. B'nai Brith's sponsorship of Hillel was eventually taken over by the Jewish Federation of Greater Vancouver.

I recall the fire on January 25, 1985 at Temple Sholom when it was on West 10th Avenue, and the Temple renting space at the Unitarian Center until the construction of the Temple on Oak Street, its existing location. I saw the growth of Louis Brier Home and Hospital building, the Weinberg Residence and what they achieved, and I saw the construction of the JCC building under the capable leadership of my close friend Karl Taussig.

In 1985 the former Vancouver Jewish Fund and Council morphed into the Jewish Federation of Greater Vancouver with Bob Coleman as its first President. The question came up of where the Federation is going as an organization, what its role in the community was and many other questions that had to be resolved. I became involved with the Federation as my parents moved into Louis Brier Home and Hospital, and I really understood much better what the aging process is all about and how totally unprepared most of us are for this important period of our lives.

## ORIGIN AND FORMATION

In 1988, the Federation received the sum of \$200K from the Federal Government in order to assess, acquaint themselves, and help in any shape or form, the Jewish seniors in the City of Vancouver. A 300 page report was made and I believe that the Federation has this report in its

archives as does the JSA. The Federation started a committee called the Seniors Advisory Council (SAC) of Greater Vancouver, they asked and received a \$10K grant from the Provincial Government and Irving Grad became its first Chairman 'President'. He was followed by Lucien Lieberman as president and I became involved as a Vice President of the Council. I was not too happy with the role and the activities of this Council then, because in effect the only thing that we were doing was having a monthly meeting in the Federation boardroom, attended by approximately 25 seniors, a speaker was available, and a publication of a bulletin was produced every month. Judy Weinstein was our professional advisor, working for the organization for one day a week. When Judy accepted the full time position for the Federation, Jenny Virtue became our advisor at one day a week.

In 2001 the B.C. Liberals were elected with a very large majority and in taking power and examining the \$10K donation made to the SAC, they questioned why the Provincial Government would help the Council, a committee of the Federation, when they already had a Foundation that should and could help the SAC. Consequently the Senior Advisory Council remained without a donor and without funds. At the same time the community at large, questioned the Federation's involvement in providing services, and decided that those services should be offered by other organizations. Therefore the Federation was told to cancel the SAC.

As President of SAC, I found myself in



a dilemma, what do I do, disband or continue in some form or another. So I called together the SAC Board, which had as members such notables as Dr. Josephine Malek and Sam Geller. As a Board we decided that the help provided to Jewish seniors in the community was important so we decided to re-establish, and registered Provincially an organization with the name of the Jewish Seniors Alliance of Greater Vancouver. We had no money whatsoever, and we applied for the same \$10K from the Provincial Government, which we obtained. After registration of the name, we asked the present Executive Director, Mark Gurvis, to help us financially to start. The Federation provided \$5K with a promise that we would spend part of this money to continue sending out the bulletin every month as before. Mark Gurvis and the Federation helped JSA with another \$15K, in order to further establish and strengthen JSA as an organization. We made one promise, that whatever we do as a program for JSA we will never duplicate the

existing services provided by other Jewish organizations in the community, and this is how the Outreach Program was started.

In 2004, we hired Karon Shear. This was a very critical point in the evolution of JSA. Karon was not only a "Girl Friday" but literally ran the office, published the first JSA Newsletter, the forerunner of the *Senior Line* magazine, worked on all JSA committees and was a confidant to me as we were ensuring the growth of JSA. We could not have done without Karon.

### ON OUR OWN AND READY TO RESPOND TO THE NEEDS OF SENIORS

Until this moment we were meeting in the boardroom of the Federation, and I decided if we were to go anywhere with this organization, we have to find a place of our own and make possible the opportunity to grow. Abba Brodt, who was working at the time as a Senior Executive with Federation expressed concern about our precarious financial situation. My

answer was I'd rather go bankrupt doing something than wasting my time and accomplishing nothing. So we moved to a permanent location in sharing the Hebrew Afternoon School's office at the Beth Israel synagogue in the basement. We used that office until we were told that the Congregation Beth Israel was going to build a new building and we could not obtain office space in the new building. We found ourselves without an office and without any hope of getting a place because offices were not available, or were so expensive that we wouldn't be able to pay for it. By sheer luck, I questioned the Unitarian Church if they had any space, which they did, and in 2011 JSA moved and has been there ever since.

**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.

## REMEMBER ALL THE THINGS THAT HAVE NOT BEEN CANCELLED

...Continued from Page 2.

current situation. Just maybe, they will experience the feeling of being loved, cared for and being treated with dignity.

### SHARING HOPE AND LOVE

Hope has not been cancelled. Covid-19 has given us all plenty for which to hope, especially for the return of those simple pleasures like interacting with our families and friends. Hope is the most important thing we can share in our conversations with others.

Love has not been cancelled. When those who care about you call and you can feel the love they have for you, pick

up the phone and pass it on to someone else who can experience the same great pleasure you experienced. Imagination has not been cancelled. You are free to imagine all sorts of ways and things with which to occupy your mind and perhaps think about any number of acts of kindness you can bestow on others. Let's not forget that naps have not been

**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.

cancelled either and there is no reason in the world not to be kind to yourself.

Be patient, stay safe and don't forget to regularly exercise your body and your mind so that when this meshugana virus is finally over we can all emerge in good shape in order to resume our pre-pandemic lives and return to all that we miss and cherish.

**Larry Shapiro and Gyda Chud**  
*Co-Presidents*

**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.

# A YEAR IN REVIEW AND FULL-STEAM AHEAD

AT THE LOUIS BRIER HOME AND HOSPITAL, SNIDER CAMPUS

Written by David Keselman

I wanted to take this opportunity to share with you my personal reflections with regards to 2020, hoping to offer relief from some of the traumatic experiences we all have gone through, and instead to inspire, to offer hope, and to start 2021 with a positive attitude and outlook. Around the same time last year, just as the dial was changing from 2019 to 2020, I recall wishing for time to slow down, feeling helpless and sensing that much is yet to be accomplished. Well, today I must admit, I will not complain or feel frustrated that time has passed—much has been accomplished—and I am happy that 2020 is behind us!

I welcome 2021 with positivity, hope, strength, vigor and resilience. It is timely to reflect back and recognize the road we travelled and remember our achievements, successes, and failures. Despite the whirlwind and minor detours created by COVID-19, we kept our focus on achieving our Mission, Vision and Values. With the help, dedication, support, and participation of our staff, residents, families, and the greater community, we embarked on new and exciting projects with new partners, participated in research; tested new technology (LiveAssist, Agartee, and PCC), eliminated paper charts, re-configured our care delivery, and created physician neighborhood models to enhance the quality of care delivered to our residents.

Our TikTok competition as part of

nursing week was phenomenal and brought joy and laughter in times of fear and sorrow. We took the time to recognize staff for their dedication and long service, as well as excellence and commitment. No doubt that the recognition tree will be filled with recognition leaves in the New Year. This year we also had the pleasure of tasting a range of food, from bubble tea to Cambodian rice and soup, we will have them coming back for more.

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I welcome 2021 with positivity, hope, strength, vigor and resilience. ”

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Our quest and journey towards a centre of excellence is full steam ahead, as we continue to receive acknowledgement and recognition for the excellent work that we do and for not being afraid to take a risk, in the name of safety and quality. In 2020, we also decided to embark on the process of being recognized as an employer of choice for 2021 and at the same time start gearing up again for our next Accreditation survey, scheduled for May 2021. We have experienced unprecedented community and family support and mobilization, resulting in significant contributions from chocolates and

flowers to wheelchair washers and other much-needed medical equipment. Our family council was able to raise a significant amount of funds to support the rejuvenation of the Shalom Garden, and install much-needed awnings for the second floor balcony to provide our residents with sun protection during the hot summer days (that will be here in no time).

The support of the community around us continues to be as strong and viable as ever, if not more, expressed directly through our families, our Foundation and our donors, we thank everyone and never take anything for granted.

In the New Year, you will continue to see many exciting changes, all with the intent to enhance the experience of our residents, families, and staff. We continue to focus on redevelopment and doing our due diligence in gathering relevant data and information to help us make sound decisions, stay responsible, and accountable for what we do and what we need.

With this in mind, I would like to wish you all the very best for 2021, and may the year be about personal and professional accomplishments, teamwork, collaboration, health, safety, and above all, no more outbreaks.

Sincerely,

**David Keselman**

**Dr. David Keselman,** MN, DHA. CHE. RN is Chief Executive Officer of the Louis Brier Home and Hospital & Weinberg Residence in Vancouver, BC. He is also an Adjunct Professor, UBC School of Nursing.





# HELP IS AVAILABLE FOR SENIORS WITH PERSISTENT PAIN

Written by Arielle Spence

Many of us have heard that aches and pains are just a part of getting older, but lasting pain shouldn't be ignored. In Canada, about 1 in 5 people have "chronic pain," which is defined as pain that lasts more than three months after an injury or illness. The prevalence of chronic pain in seniors is as high as 65% for seniors who live at home and 80% of older adults living in long-term care. Conditions like arthritis, fibromyalgia, migraines and persistent low back pain are all forms of chronic pain.

Despite the number of people living with chronic pain, it's a condition that has been overlooked for many years and was only recently acknowledged by the World Health Organization as a disease in its own right. Many Canadians have difficulty accessing the care they need to manage their pain for reasons including lack of availability of services, high treatment costs, and long wait-times, but support is available for those who need it.

**Pain BC** is a registered charity with a mission to enhance the well-being of all people living with pain through empowerment, care, education and innovation. The organization is one of the leading voices in chronic pain advocacy in Canada and provides support to thousands of people across BC through four main programs:

**The Pain Support Line** is a free phone line that provides a safe space to talk confidentially with a registered social

worker about pain and its impacts; find information on pain and self-management, and be connected to community resources. The Pain Support Line can be reached by calling toll-free (1-844-880-7246), by emailing [supportline@painbc.ca](mailto:supportline@painbc.ca), or by filling out a self-referral form on the Pain BC website at [painbc.ca/supportline](http://painbc.ca/supportline).

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**While aging  
is inevitable, living  
with unmanaged  
pain is not.**

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For those who are interested in more sustained support, **Coaching for Health** is a free telephone coaching program that supports people with pain to learn self-management skills, regain function and improve well-being. Clients of the program have weekly phone sessions with their coach for up to 12 weeks to learn how to better manage pain and set realistic goals for a return to function, confidence and hope. The program is accessed through a referral from a licensed medical professional. Find out more at [painbc.ca/coaching](http://painbc.ca/coaching).

Pain BC also offers **Pain Support and Wellness Groups**, which are free online support groups that offer an opportunity for people living with

persistent pain to meet regularly and build a community of support while learning about pain, pain management and coping strategies. Each two-hour session enables participants to share their experiences, discuss self-management skills and take part in gentle movement exercises as a group. Find out more or register for free at [painbc.ca/supportgroups](http://painbc.ca/supportgroups).

Pain BC also offers a free online self-management and pain education website called **LivePlanBe**. It includes articles and self-assessments to help people with pain track their health and learn more about evidence-based pain management, with topics ranging from pain science, relationships, sleep, paced activity, and much more. Find out more at <https://www.liveplanbe.ca/>

While aging is inevitable, living with unmanaged pain is not. If you or someone you love is experiencing chronic pain, remember that help is available and you are not alone. Connect with Pain BC to learn more by visiting [www.painbc.ca](http://www.painbc.ca) or on Facebook at [www.facebook.com/painbc](http://www.facebook.com/painbc).

**PAIN & BC™**



**Arielle Spence** is the Education Program Coordinator at Pain BC

and supports the development, delivery and evaluation of Pain BC's education programs. They are a life-long learner and are passionate about promoting equitable access to health care.



# HOW WELL DO TREATMENTS PREVENT COVID-19 SHINGLES, HEART DISEASE, DIABETES AND ANYTHING ELSE THAT MIGHT AIL YOU? Sunday, November 22nd, 2020



Written by Shanie Levin

The Jewish Seniors Alliance Fall Symposium took place Sunday, November 22nd. The topic of the guest speaker, **Dr. James McCormack**, was *How Well Do Treatments Prevent Covid-19, Shingles, Heart Disease, Diabetes and Anything Else that Might Ail You?*

Dr. McCormack is a professor in the faculty of pharmaceutical sciences at the University of British Columbia, a podcast host and a YouTube content creator. **Gyda Chud**, Co-President of JSA reviewed the foundational goals of JSA: Outreach, Advocacy and Peer Support.

**Marilyn Berger**, Past-President of JSA, introduced Dr. McCormack, mentioning his high regard for shared decision making (between doctor and patient). Dr. McCormack began with his philosophical beliefs that can be found on the website [www.therapeuticeducation.org](http://www.therapeuticeducation.org). He emphasized that he receives no money

from pharmaceutical companies and his only income is his salary from UBC. His popular medical podcast is called *BS without the BS*. It includes many topics, including nutrition (recommending the Mediterranean diet) and anti-aging creams (they are all the same).

He suggests being skeptical and checking all information, as some medications are useful but many don't work well. For example, new drugs are not much better than those they are replacing and many doses are too high. We need to see evidence-based outcomes. We don't care how they work, but if they work. Dr. McCormack listed a number of popular beliefs that are not evidence-based and indeed science indicates that they are not true. His examples included the following myths: not swimming immediately after eating; sugar makes children hyperactive; you lose body heat through your head; drinking eight glasses of water a day; eating carrots helps eyesight and spinach is strengthening and low fat diets. Also, there is no evidence that you need to finish all medications. For example with antibiotics, if you are asymptomatic after seventy-two hours, you can stop.

The Golden Pill award, for a breakthrough in new medication, has not been awarded for the last eight years. Dr. McCormack stated that “so called diseases”, such as elevated blood pressure, bone density issues, and high glucose levels,

should be identified as “risk factors”, rather than diseases. He also said that many medications do not alter outcomes. It's all about the numbers—what is the relative reduction of symptoms after taking certain medications. If the reduction is only two per cent, is it worth taking a drug that has many side effects? For instance in the case of cardiovascular disease, following a Mediterranean diet and exercising may have more benefit than many drugs.

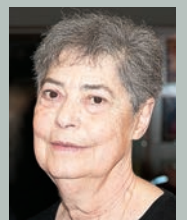
Regarding the two vaccines for Covid-19, he feels that the work has been outstanding and the oversight phenomenal. Also that vaccines for contagions are very important. Dr. McCormack concluded by reminding us that we can harm people with tests and/or treatments. It is important to think for yourself, ask questions and have hope. Following his presentation there were many questions. Among them, Dr. McCormack answered those about the use of tamoxifen, blood thinners and Prolia.

**Ken Levitt**, Past-President of Jewish Seniors Alliance, thanked Dr. McCormack for his presentation and his emphasis on being alert about medications. The participants' feedback was extremely positive.



Dr. James McCormack

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







# GERONTOLOGY RESEARCH PANEL: EAGER TO SHARE OUR INTERESTS AND HELP OUR COMMUNITY - WHAT'S UP WITH SENIORS

Friday, January 15th, 2021



Written by Shanie Levin

The second in the JSA Snyder Foundation Empowerment Series was jointly sponsored by JSA and the Sholom Aleichem Seniors of the Vancouver Peretz Centre. Seventy-two participants tuned in to the event via Zoom. The program was called *Gerontology Research Panel: Eager to Share our Interests and Help our Community—What's Up with Seniors*.

**Lindsay Grasso** (Masters student, SFU) was the first presenter. She explained that she had become interested in the topic of separating couples when it impacted her own family. The problem of separation will become more severe as more couples age together and current settings in long term care separate them depending on their individual needs.

The impact of dementia on couples is profound and often one partner ends up as the caregiver for the other. When the point is reached that institutional care is required, being together would alleviate a lot of the pain. Lindsay has received a grant to look into the long-term effects of separating couples, also, the effects on visiting spouses (when only one is in

care). In both cases there is the loss of a shared life, shared memories and the beginning of mourning. It is important to continue the relationship through visiting, sharing activities and eating together. The healthier spouse would need to monitor care and advocate for their partner.

**Kishore Seetharaman** (PHD student, SFU) has a background in architecture and became interested in planning and designing dementia-friendly neighbourhoods, especially in Metro Vancouver. Worldwide, 70% of dementia-affected adults live at home so this is more than a health issue—it is a community issue. Kishore would like communities to focus on eliminating stigma, raising awareness, social engagement, accessibility to services, improving planning and design of public spaces, and support to caregivers.

In terms of design, familiarity and easy recognition are important. Signs should be clearly visible and easy to read. Distinctive landmarks are helpful for finding the way. There is some work being done in Vancouver in this area but it is not clear as yet how it will be implemented. Kishore would like to

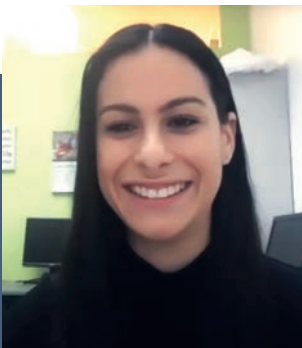
create a body of knowledge for designs.

**Eireann O'Dea** (PHD student, SFU) became interested in volunteerism as an undergraduate through volunteering at the Jewish Community Centre and L'Chaim Adult Day Care. There she encountered senior volunteers who were volunteering with other seniors. She is looking into the benefits on health and a sense of purpose in life, as they move away from former roles.

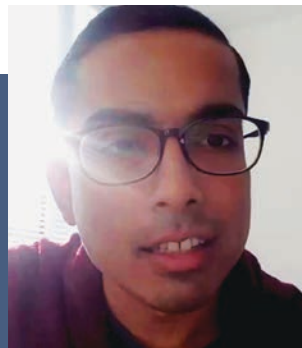
Eireann has interviewed a number of senior volunteers regarding their motivation. Many spoke of *Tzedakah* (charity) and *Tikkun Olam* (repairing the world) and the passing down of Jewish culture. This led her to the exploration of cultural generativity, i.e., the desire or need to keep cultural identity alive and pass it down to future generations. This is especially relevant to ethno-cultural minorities. She will be studying the effects on both the volunteers and the members of the communities.

During the Q and A, the questions had to do with dementia villages, design and cost of facilities for couples in long term care, retention and recruitment of volunteers, and more. All these questions and answers reflected the positive engagement of participants in what was an excellent, well-informed and inspired session. **Shanie Levin**, program coordinator for JSA, thanked the participants for their very engaging presentations.

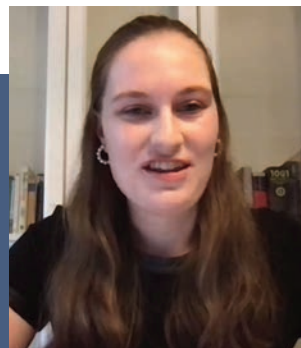
This program including the power-point images will be available on the JSA website.



Lindsay Grasso



Kishore Seetharaman



Eireann O'Dea





# *Portrait of an Artist*

## REUVEN RUBIN

Written by Tamara Frankel

With thanks to the Reuven Rubin Museum, Tel Aviv. Visit [www.rubinmuseum.org.il](http://www.rubinmuseum.org.il)

**R**euven Rubin (1893-1974), one of Israel's most popular and acclaimed artists, signed his paintings with his first name in Hebrew and his surname in Roman letters. This bicultural signature reveals much about the man. Rubin was born in Romania and immigrated to Palestine in 1912 to study at Bezalel School of Art. A year later, rebelling against the traditionalism of Bezalel, he decamped to Paris to attend L'Ecole des Beaux Arts. There he was influenced by Cezanne and other

artists who rebelled against the conservatism of the past. Rubin resettled in Palestine in 1922 after his studies in Paris, then he spent time in Romania and in New York. Upon his return, he was immediately struck by the vibrancy and animation of the place and its people, both Jews and Arabs. He used the skills learned in Europe to paint his new country's landscape. Rubin, like his signature, incorporated European painting style into an appreciation of the land of Israel.





## THE ERETZ-YISRAEL STYLE

Rubin was one of the founders of the *Eretz-Yisrael* style, a style which disengaged from the Diaspora and embraced the Hebrew and the local and the new. These artists drew inspiration from the landscape, the light, and the people who were around them. Zionism viewed immigration to Eretz Yisrael as a form of rebirth. In fact, some of the founders considered the date of their arrival as their new birth date. A fervent Zionist, Reuven Rubin seemed to feel the same way. "Here in Jerusalem, Tel Aviv, Haifa and Tiberias I feel myself reborn," he wrote in 1926. "Only here do I feel that life and nature are mine. The gray clouds of Europe have disappeared. My sufferings and the war too are ended. All is sunshine, clear light and happy, creative work. As the desert revives and blooms under the hands of the pioneers, so do I feel awakening in me all [my] latent energies" (Rubin's autobiography, *Rubin, My Life, My Art*).

Rubin's paintings follow the changes and growth of Israel's landscape, from unpaved roads and villages to electric lines in Tel Aviv and a water tower on Rothschild Boulevard. He was enchanted with the multi-dimensional fabric of "Little Tel Aviv" that included Arab families, fishermen and the Jewish population. His portraits consistently reveal the model's identity and sense of belonging to the land. Land, physically and conceptually, was a dominant factor in Zionist ideology, and landscape was

also Rubin's territory. Israel's national poet Haim Nachman Bialik, who was Reuven Rubin's neighbour, said that "to see the utmost purity of the land of Israel, one must look at the paintings by Reuven."

## RUBIN'S GOLDEN AGE

The five years between 1923 and 1928 were Rubin's golden age. Art critics agree that rather than his paintings of olive groves and Biblical episodes, his best paintings were the wonderful depictions of the sea, villages and cities rising on the dunes and of the vendors, farmers, rabbis, writers and artists who inhabited them. His singular, unfettered, visual language is, as Dr. Motti Omer wrote, a faithful expression of Tel Aviv as it appeared to those who conceived of it, and who desired to create a new environment liberated from the weight of the past.

Rubin's one man show opened the new Tel Aviv Art Museum in 1932. He was the subject of major exhibits at the Israel Museum and in galleries in London and New York. His work continues to inspire. Upon his death in 1974, his Tel-Aviv home on 14 Bialik Street became the Rubin Museum. The museum houses many of his paintings and, as of 2014, it has become a home for performing arts, music and dance. These current performances give new life to Rubin's legacy as a pioneer who brought views of Israel, its landscape and its people to a wide audience.

### 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 JCC.



Left: *Tiberias*, 1926-28 coll. The Israel Museum, Jerusalem, courtesy Rubin Museum, Tel Aviv

Top: *Flute Player*, 1970, courtesy Rubin Museum, Tel Aviv

Middle: *Rider with Bouquet*, 1971, courtesy Rubin Museum, Tel Aviv

Bottom: *Orange Groves Near Jaffa*, 1928, Rubin Museum collection, Tel Aviv

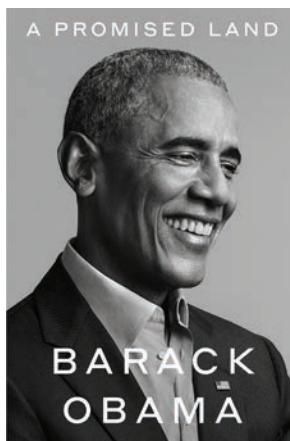
# CURL UP WITH A GOOD BOOK

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.

## A PROMISED LAND

Written by Barack Obama



Full disclosure: The second that I heard about this book, I pre-ordered it! I am a fan of Barak Obama. This book, all 768 pages, is the first of two volumes, this one encompassing parts of his early political life, his presidential campaign in 2008 and ending with the death of Osama bin Laden in 2011. Obama is an excellent writer. The book is a pleasure

to read and he evokes a sense of place with a light and sure hand. His focus is more political than personal, but when he does write about his family it is with warmth and clarity. I admit that there were times when the political intricacies were too detailed for me, so I skipped a few pages. He acknowledges his shortcomings as a husband, he mourns his mistakes and broods still on his choice of words during first Democratic primaries.

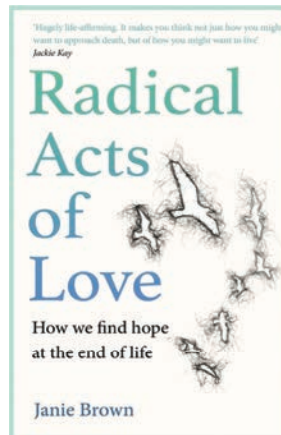
After reading this book, I understood the enormously difficult task he had, as President, to get anything done. He was blocked at every turn by the Republicans, no matter what the issue, the economy, health care, climate change, etc. How could he remain sane and coherent, optimistic and productive under these circumstances?

He has expressed concern that Michelle Obama's book, *Becoming* would probably be a more popular book than his! *Becoming* has sold more than 10 million units worldwide since 2018. *A Promised Land* is on track to be the best-selling presidential memoir in modern history. Barak

Obama promises to create an audio version of his book, as he did with his two previous books, *Dreams from My Father* and *The Audacity of Hope*. Michelle Obama has created an audio version of her book *Becoming*. I now plan to read his two previous books. He is that good a writer. High praise for an exceptional human being!

## RADICAL ACTS OF LOVE: HOW WE FIND HOPE AT THE END OF LIFE

Written by Janie Brown



Janie Brown demonstrates the power of a book to transform death into life, despair into hope, sorrow into joy and pain into love with these twenty astonishing encounters with the dying. Each story is a moving and instructional tale of love and family and the navigation of difficult and inevitable times.

She draws on her extensive knowledge and experience from her decades-long career as an oncology nurse, counsellor and founder of the Callanish Society, a non-profit that has helped people living with and dying from cancer. Family members often worry that engaging in talk about dying with their loved ones might be perceived as them giving up hope. This fear often becomes regret for the family members later. Dying people often want to protect their loved ones from the hurt of separation and choose to avoid talking about it. We read of examples of both of these most difficult of conversations.

Brown states that a major reason for writing the book was to help people to figure out how to live well, have a quality of life, between the time of diagnosis and death. She wanted to capture the wisdom she had gained from listening to these people who were facing death, knowing that their experiences and relationships facing imminent death would be wasted because it wasn't being captured. The book is equal measure sad and comforting as it respectfully guides the reader towards the simple and satisfying idea that if we take charge of our lives we should also take charge of our deaths.

I personally related to all twenty of her stories; I learned so much and now feel better equipped to live life and face death when necessary.



# BOOK REVIEW: FOUR UMBRELLAS

## A COUPLE'S JOURNEY INTO YOUNG-ONSET ALZHEIMER'S

### JUNE HUTTON AND TONY WANLESS

Written by Janet Nicol

Caregiving for a spouse - as opposed to a parent - has its own specific stories and heartbreaks. June Hutton, a Vancouver-based novelist and teacher, has experienced both. The author's mother had Alzheimer's in her final years and then her spouse, Tony Wanless unknowingly was struck with "young-onset" Alzheimer's prior to his retirement from the *Vancouver Province*, aged 53. Fourteen years would pass before Wanless received a diagnosis in 2017, allowing him and Hutton to fully understand his inexplicable episodes—such as when Wanless packed a suitcase with four umbrellas.

Hutton is the primary storyteller in this account while Wanless contributes detailed and compelling emails throughout. The pair's agreement to conduct an on-line correspondence began in 2017 and proved to be an effective vehicle for Wanless to express his memory loss, freelance writing struggles and emotional highs and lows. The result is a groundbreaking book in both format and content, offering the reader a unique window into the couple's

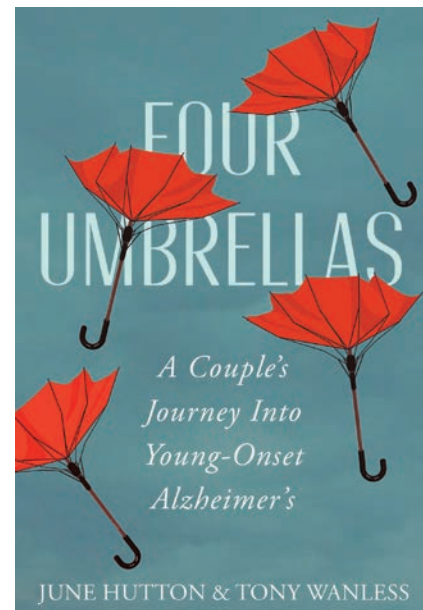
fearful, but also courageous, journey with Alzheimer's.

"Even in my stupidity," Wanless writes as he remembers grappling with the implications of a serious fall in 2011, "I had some sense of understanding and knew that clearly something was wrong. But I didn't have a clue as to what it was. And I was certain I couldn't have a brain problem."

Readers are fortunate to be led on this journey by two articulate, generous guides. ”

Hutton is pointedly honest about her feelings too. "I reach my breaking point as anyone else would," she writes. "I go for short walks when the conflict becomes too much, and, much as when I let a few minutes elapse following a heated discussion, I can then return to a new, calm Tony. I try to practice mindfulness and meditation to calm myself."

Besides Hutton's well-paced narrative and Wanless' valuable insights, Hutton deftly weaves in facts about the science of the mind and the limitations of the



medical community. Early diagnosis is essential but so is early acknowledgment of "early onset" by practitioners, she writes. The book concludes with a previously published short story by Hutton, written long ago on the very subject of Alzheimer's, the author's intuitive observations displayed.

While Hutton and Wanless continue to experience isolation, especially in this time of a global pandemic, they also receive support from family and friends. Wanless attends Paul's Club, a drop-in facility for adults with Alzheimer's, located in Vancouver's Yaletown district (a portion of the book's proceeds will go toward the Club). *Four Umbrellas* is already in its second printing, proving that many people have a desire to understand and support each other in their life challenges. Readers are fortunate to be led on this journey by two articulate, generous guides.

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Janet Nicol is a freelance writer and retired high school history teacher in Vancouver. Her writing blog is at

<http://janetnicol.wordpress.com/>

# SENIORS AT THE MOVIES

Written by Dolores Luber

Go to your search engine (e.g. Google) and write: Where can I see (name of film)? Movies come and go on the major streaming services. I have found a new streaming service: Kanopy.com. You must be a member of the Vancouver Public Library. Free to join, write down your membership number and pin number. Then go to Kanopy.com, fill in the form, you now have available hundreds of art films, independent movies, etc. FREE!



## THE MULE

2018



*The Mule* is one of Clint Eastwood's triumphs, based on the true story of "a 90-year-old drug mule." Clint again plays a crusty curmudgeon fallen on hard times. He loses his business and

home, and is forced to dismiss his small work crew. Totally isolated because he has been rejected by his wife, daughter and granddaughter, his salvation comes from a stranger, who offers help by way of some mysterious introductions. Enter the Mexican drug cartel and running cocaine. This is a charming, funny and very-human story which sometimes makes you wince. Available on Amazon Prime/ Crave.



## CAPONE

2020



*Capone* captures the aging, broken-down, not-all there Al Capone in 1946, and Capone's days as the legendary underworld kingpin of Chicago are long gone; so are the

eleven years he spent in prison for tax evasion. At age 47, a retired gangster, comfortable but ailing, teetering towards death, he drifts through the days at his creamy mansion in Palm Island, Florida, surrounded by federal agents who are watching his every move. There are surprises and mysteries. It is a gorgeous, sophisticated, rough-and-tumble gangster flick! Fascinating. Available on Amazon Prime.



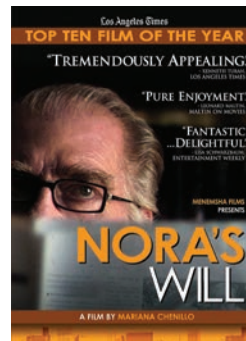
## THE TRIAL OF THE CHICAGO 7

2020



*The Trial of the Chicago 7* is based on historical facts. Superb writing and the absolutely brilliant performances by the ensemble cast make this legal drama a riveting watch. In August 1968, a protest against the Vietnam War at the Democratic National Convention in Chicago turned violent. Seven men were charged by the Federal government with crossing state lines and conspiracy to incite riot. The movie follows the trial until the verdict in February 1970, and explores the tensions between the activists. Excellent. Available on Netflix.ca.

## FOREIGN FILMS



## NORA'S WILL

2008



*Nora's Will* begins five days before Passover. Battles of wills between divorced couples are nothing new, but *Nora's Will* adds a delicious twist to this Mexican film of an Orthodox

Ashkenazi Jewish family in Mexico City. José fights a stubborn rear-guard action against his dead ex-wife's final wishes and in the process learns more than he anticipates about his family and himself. The film was a huge success in spite of the serious subject matter: suicide, betrayal, and Jewish law. It has many comical moments and is a delight to watch. In Spanish with English subtitles. Available on Kanopy.com.



## LEONA

2018



*Leona* is a coming-of-age story of a young Jewish girl in Mexico City, from a Sephardic Jewish family of Syrian origin. Ariela falls in love with Ivan, a gentile; this is absolutely



forbidden. Having survived persecution, racism and civil war, the Jewish community found ways to survive and prosper in their new homeland, relying on traditions and tight-knit social dynamics. Ariela is constantly rejected by her community for who she is and the kind of artist she aspires to be, but she also doesn't quite fit in with her new social circle. The question is, should you sacrifice your individual happiness in the name of upholding tradition? In Spanish with English subtitles. Available on Kanopy.com.



**THE LIFE AHEAD**  
2020



*The Life Ahead* portrays Rosa, played by Sophia Loren, who is a streetwalker turned children's caretaker. After being assaulted and robbed by young Momo, a teenage Senegalese refugee,

she agrees to add him to her brood, mostly the children of sex workers trying to break bad habits. Momo at 12 is full of anger, he has never even heard of the Holocaust, yet he understands what it is to be hated, unwanted. He and Rosa discover they are kindred spirits. Madame Rosa is a Holocaust survivor, and dementia has condemned her to reliving the horrors. Momo agrees to fulfill a promise she asks of him. The acting of these two is superb, worthy of your attention. In Italian with English subtitles. Available on Netflix.ca.

**TELEVISION SERIES**



**THE QUEEN'S GAMBIT**  
2020



*The Queen's Gambit* is a television series about addiction, obsession, trauma, and chess. It is a thrilling coming-of-age story centered on the competitive world of chess which

has similarities to a sports movie. How can one get excited over chess? Anchored by a magnetic lead performance and bolstered by world-class acting and marvelous visual language, it is one of the year's best series. Available on Netflix.ca.

See *Lost in Translation* (page 22-23) for remarks about the television series: *The Crown*, *Doc Martin* and *Schitt's Creek*.

**DOCUMENTARIES**



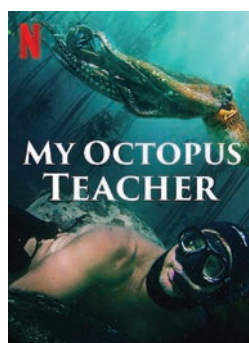
**OPERATION WEDDING**  
2016



Leningrad, 1970. A group of young Jewish dissidents plots to hijack an empty plane and escape the USSR. Caught by the KGB a few steps from boarding, they were sentenced

to years in the gulag and two were sentenced to death; they never got on a plane. Forty-five years later, filmmaker Anat Zalmanson-Kuznetsov reveals the compelling story of her parents, leaders of the group, "heroes" in the West but "terrorists" in Russia, even today. This film uncovers an overlooked chapter in the Soviet Jews' fight for freedom. Her mother was kept in solitary confinement in a room without a window that was so cold, she tried wrapping herself in newspaper. Her father asked for years to be given a mattress to sleep on. He swallowed pieces of rolled paper to hide the book that he was writing from prison guards. They were eventually exchanged for Soviet spies. The facts are brutal. In Hebrew, Russian and English. Available on VIMEO.com (Hint: join, watch the movie, the first month is free, and then opt out.)

**FOR THE YOUNG AT HEART**



**MY OCTOPUS TEACHER**  
2020



*My Octopus Teacher* is a stunning documentary which reinforces the power of nature. Free diver and filmmaker Craig Foster tells a unique story about his friendship and bond

with an octopus in a kelp forest in Cape Town, South Africa. Foster battles career exhaustion and depression by going for daily swims. He becomes fixated upon a common octopus, freediving daily to visit and observe her in her natural habitat. He is amazed by her ability to find clever ways to evade predators and adapt to her environment. This is a love story and an emotional ride. Beyond great! Available on Netflix.ca.

# PROFILE OF A DIRECTOR: DEEPA MEHTA

Written by Dolores Luber

Deepa Mehta, age 71, is an Indo-Canadian film director, film producer and screenwriter, best known for her *Elements Trilogy*, *Fire* (1996), *Earth* (1998), and *Water* (2005). Mehta collaborated on the screenplay for *Midnight's Children* (2012) with the novel's author Salman Rushdie. Her latest film is *Funny Boy* (2020). Many of Mehta's films across her career have focused on the duality of her national and cultural identity which has informed much of her filmmaking. With her childhood and heritage informing her of key Indian and Hindu traditions, she has been seen to compare these practices with a more "Westernized" philosophy that has often resulted in controversy. The production of her film *Water* was delayed by protests from Hindu fundamentalists while several of her other films' releases have seen boycotts across India, including the film *Fire*. Her films have been nominated for Oscars multiple times and earned honours at many other prestigious film festivals. In May 2012, Mehta received the Governor General's Performing Arts Award for Lifetime Artistic Achievement, Canada's highest honour in the performing arts. Her movies are rich, cultural, cinematic and emotional experiences worthy of your attention. Mehta's ability to combine historic conflicts, religious practises and human relationships is extra-ordinary.

*Fire* follows the love affair between two sisters-in-law whose own sexless marriages bring them together in a passionate romance (filmed in deep shadow, not explicit). One wife is barren, her husband takes a vow of chastity. The other brother openly prefers his mistress to his wife. The film present a social system in which many women have no rights, highlighting the stifling bonds of tradition.



*Earth* focuses on the time before and during the Partition of India and Pakistan in 1947 and how the life of one family was uprooted by this historical event. Events are seen through the

eyes of 8-year-old Lenny Sethna, the pampered daughter of an affluent Parsi family in Lahore. Mehta captures the scale of India's division with nuance, cinematic eloquence, and emotional depth.



*Water* is the story of an eight-year old child widow who is forced to enter a house of widows for the rest of her life, a second-class status in fundamentalist Hindu society. Chuyia is high-spirited, and finds two allies: Shakuntala, a mother-figure, and the beautiful Kalyani, who is like a big sister. When Kalyani falls in love with an idealistic Brahmin named Narayana, their relationship becomes a battle in the war between traditionalism and Gandhi's modernism.

*Midnight's Children* tells the story of Saleem Sinai, a boy born at the stroke of midnight on Aug. 15, 1947, the very moment when India gained independence from British Rule. The story is about Saleem's family, infants switched at birth—one rich, one poor—amnesia, war, riots, sudden shifts of fortune and a kind of mother-son reunion. The movie has elements of magical realism (Saleem can telepathically communicate with other children born at the same time). An ambitious and worthy effort!



(Available at the Vancouver Public Library and at Video Catalogue formerly Black Dog Video on Cambie St.)

*Funny Boy* is a coming-of-age tale about Arjie, a boy from a wealthy Tamil family, exploring his sexuality as a gay man. It is set in the time leading up to Black July, the 1983 anti-Tamil pogrom that preceded a bloody civil war lasting until 2009. Homosexuality was illegal in Sri Lanka in 1983 and remains so. Arjie's sexuality and the same-sex relationship he has with a schoolmate are a focus of the film, as are the prejudice he faces and the general tension and hatred that surround him as his country descends into chaos. (Available on CBC Gem.)



# CARTOON CAPTION CONTEST

CONGRATULATIONS TO OUR WINNER:  
**LESLIE BENISZ**

## OUR RUNNERS UP:

1. Monster: "I'm Frank N Stein."

Bobba: "Mishte Stein, your hair stands up so Straight ...,  
*Nu, zog mir - you maybe have a bris mit electricity?*"

2. Monster: "I'm Frank N Stein."

Bobba: "Funny, you don't look Jewish..."

- **David Ginsburg**

Tall man: "Hey, you look like my Mother!"

Short woman: "Actually, I'm your Sister. The reason I'm so  
small is that you ate all my herring!"

- **David Kirkpatrick**

1. Thug: "Hey Bubbie, sorry I messed up da heist."

Bubbie: "Moishe, I said you messed up the house! Go clean your room!"

2. Thug: "I got some problems I need to iron out."

Bubbie: "You want I should iron your *forshimeld* suit, Moishe?"

- **Edward Korbin**

Arnold: "Mummy, I think I'm gay."

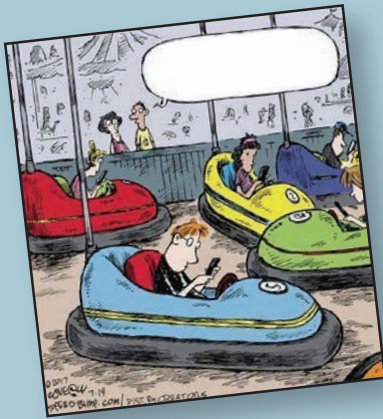
Mom: "Then get rid of all that brown and wear some  
pink and purple like me."

- **Dr. Hinda Avery**



Terminator : "I'll be back!"  
Jewish Mother; "So you're sent from the  
future? Why didn't you come last week when  
I needed some help in the kitchen?"

**Thanks to everyone for your  
creative efforts!**



## 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](mailto: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*.

*Due to the quarantine,  
I will only be telling  
inside jokes.*

*People are excited about the new  
iPhone but no one has caught up with  
the awesome technology of using  
your blinker when you drive.*



CENTERPIECE

# INSTEAD OF ROOMBA LET'S RHUMBA EXERCISE NOT MEDICINE

Written by Rita Roling

A few weeks ago I had zoom coffee with friends. We are all older and eventually our conversation centred around the positive and the negative aspects of aging but the pondering was interrupted by beeping. “Time for medication,” said Anna. The talk shifted to prescription drugs, and it turned out that everyone was taking at least one prescribed medication per day. Our zoom group is not unique. Pharmacological research shows that the average person over the age of 65 takes at least 5 different medications a day. Pharmaceuticals may hold chronic disease in check but for these to have maximum effect they must be augmented with some form of exercise. Studies demonstrate that sitting less and moving more lower the risk of developing ailments such as diabetes, pulmonary or cardio-vascular diseases. Exercise strengthens the body and has the capacity to lower the risk of reoccurrences of spiking blood pressure or complications from diabetes. Exercise is the only treatment which is able to

maintain and enhance mental alertness.

**The recommended dose: In order to maintain health and fitness older adults need to do some form of physical activity for 150 minutes per week.**

We live during pandemic times and what was previously normal no longer applies. Our daily routines have changed and so have our exercise habits. Social isolation and distance restrictions dictate that we stay at home; no more visits to the gym,

no swimming in the community pool or spinning classes with friends.

**When unexpected life circumstances happen it is easy to fall into a rut, bow to lethargy and stoop to learned helplessness.**

The time has come to devise exercise routines which suit your “confinement.” Keep in mind that a short walk between the sofa and the fridge is not enough. Exercising the jaw does not constitute a physical workout unless it is combined with something that involves large and small muscles groups. It is easier to follow through with resolutions if they are enjoyable. Think about what you like and then develop a routine. Choices such as: dancing, walking, gardening and domestic chores are all physical and can take place at home or in a neighbourhood park.

Why not start the day with a morning walk and later do some gardening? Medical professionals, such as Dr. Bonnie Henry, stress that during health-risk times it is especially important to connect with nature. Non-evidenced research surmises that spending two hours a week outdoors decreases depressive episodes and is comparable to antidepressant treatment. Heavy

Exercise is the only treatment which is able to maintain and enhance mental alertness.





gardening such as digging, carrying, raking and watering will melt away the 400 calories hidden in a donut and all your major muscles groups will be utilized. Tending to potted plants on the patio is less strenuous but it is still an important workout as stretching, bending and lifting movements are required.

Vacuuming may not be your favourite activity but it provides a workout akin to a rowing machine. You can “fun it up” and put on headphones, listen to your favourite music and dance away while you pull, push, bend and stretch. If you get bored of vacuuming try doing the laundry as the same muscles will be in play. If your washing machine is in the basement, your workout will be enhanced by walking up and down the stairs carrying a heavy laundry basket. Climbing stairs a few times a day is an excellent workout and imagine the money you save by not buying a StairMaster.

The psychological and physical health benefits gained by being physically active are huge. Energy levels increase and so does the quality of life. Men seem to understand the correlation between health and exercise, but according to research older women may feel physically vulnerable and question the health benefits.

Some of the excuses women give for their non-compliance may not be convincing but are inventive. Examples are:

Older people should not make fools out of themselves,  
I have a weak heart and cannot get excited,  
I do not need to exercise because I am already healthy,  
My hay-fever is terrible and I cannot go outside,  
I get dizzy and will fall and break my hip,  
and I just had my hair done.

Interesting fabrications but the facts are that to reach our own maximum health, small and large muscles need a daily workout. For you who do it, keep it up! For those who are embarking on a fitness journey, get going but remember to discuss your intentions with your physician before you start flexing.

**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 an executive of JSA and a member of the editorial committee.



# THE RBG WORKOUT

by Bryant Johnson

RBG's workout begins with five minutes on the elliptical and some stretching. She then moves on to the machines:

For most exercises, she does three sets of 10 to 13 reps, starting with a bench press (she puts up 70 pounds!), followed by leg curls, leg presses, chest flies, and lat pull-downs.

Next up: seated rows and standing rows, one-legged squats, and 20(!) push-ups (no knees). She also does a 30-second standard plank, and then 30 seconds on each side. After the planks come arm and shoulder moves with dumbbells, while seated on an exercise ball. Johnson also has RBG pin the ball to the wall with her back, and alternate squats and dumb-bell curls with 12-pound weights. Whew! And she's not done yet.

She also does step-ups, and a series of other leg exercises (including more squats on top of an upside-down BOSU ball). To finish strong, Ginsburg sits on a bench holding a medicine ball, stands up, throws the ball to Johnson; he throws it back to her, she sits back down, and repeats.

Feeling inspired to get as ripped as a Supreme Court justice? Check out this 45-minute Burn Boot Camp Workout designed to build strength and stamina. Best of all it doesn't require any equipment—just your own body weight. *The RBG Workout* book is at the Waldman Jewish Public Library.



# LOST IN TRANSLATION: DID YOU JUST CALL ME AN ANORAK?

Written by Dolores Luber

I had never heard of this word until a few months ago. You will judge for yourself if I am indeed an anorak!

**Definition:** The word anorak comes from the Greenlandic (Kalaallisut) word *annoraaq*. It did not appear in English until 1924; an early definition is “a beaded item worn by Greenland women or brides in the 1930s”. It is applied to Western imitations of this garment. An anorak is a pullover hooded jacket in weather-resistant material, long enough to cover the hips, it usually has many pockets.

**Modern Interpretation:** “Anorak” is a British slang term which refers to a person who has a very strong interest, perhaps obsessive, in niche subjects. This interest may be unacknowledged or not understood by the general public. The term is sometimes used synonymously with “geek” or “nerd.” The term is used to describe a person interested in detailed trivia which other people find boring. In other words, a “socially inept person.” In England there was a group called the trainspotters who often wore unfashionable but warm parkas called “anoraks” when standing for hours on



station platforms or along railway tracks, noting down details of passing trains. Such people often wear anoraks for their practical pockets for notebooks, pencils, other pencils, and so on.

As editor of *Senior Line*, it is my job to write about movies, television series and documentaries. Not only do I watch them, but I also read articles about them. I do so with enthusiasm... perhaps in excess? For example, the superb British television series, *The Crown*, based on the life and reign of Queen Elizabeth. The royal protocol adviser on *The Crown* describes hawk-eyed people who point out the Netflix show's errors as “anoraks.” Halfway through the Fourth Season, I started reading about the falsehoods and misrepresentations in the series. I began to investigate. I then had to watch *Diana, In Her Own Words*, a documentary with Diana speaking to a journalist. Not enough, I then found and watched *The Story of Diana* as told by her brother, Charles Spencer.

What about Margaret Thatcher, longest serving Prime Minister of Britain, and the first woman to hold the office, the Iron Lady? I found out that Thatcher had little interest in advancing women or women's issues. In the show the Queen says to Thatcher “I'm assuming no women (in the Cabinet).” “Oh, certainly not, not just because they aren't suitable candidates. But I have found women in general tend not to be suited to high office anyways,” responds Thatcher. “Why is that?” The Queen

asks. “Well, they become too emotional” responds Thatcher. OUCH! Then I went back and watched the rest of *The Crown*, Season 4. I was satisfied, I knew truth from fiction!



I began to watch *Doc Martin*, an engaging British television series about a Doctor who has to stop performing surgery because he has a blood phobia; he becomes a physician in a small Cornish town. He is pompous, arrogant, lacks empathy and is unloved by his patients. He is often called “tosser.” This is British slang for a stupid or despicable person, an obnoxious jerk. How my vocabulary is increasing! Every show has a medical problem and a superbly accurate diagnosis. I revelled in it. Cornwall, where is that? I looked it up. Cornwall is at the most south western tip of England. What town was this series filmed in? Answer: Port Isaac. I watched the whole nine seasons, back to back—no let up. Then a friend said that there was a documentary about a men's choir which takes place in the same town as *Doc Martin*. I watched *Fisherman's Friend* with pleasure, checking out the landmarks that I had become familiar with in *Doc Martin*. Port Isaac is now flooded with tourists. I heard a rumour that, by public demand, they are filming Season 10, I can't wait!

The last example of my anorak-like behaviour was the Canadian, award-winning television series, *Schitt's Creek*.



A very rich, spoiled Jewish family loses all their wealth and must move to their last asset, the town of Schitt's Creek which they had bought on a lark. The shabby Rosebud Motel becomes their residence. Father, mother, son and daughter must exist in two small rooms of the motel. Oy Vay! The daughter is precocious and flakey, the son is gay and elegant; all are extremely well-dressed. Where does he buy his clothes? Mom has a wardrobe of wigs which she alternates constantly. The townfolks do not know what to make of this snobbish but poverty-stricken family.

Where was this filmed? Does the motel exist? The show was filmed in the town of Goodwood, just north of Toronto

(maybe). Is this based on a true story? The writer of the series, Daniel Levy, stars in the show with his father, Eugene Levy who is also its co-creator. AND the friendly waitress, Twyla is Daniel's sister—a truly family affair. The script is based on some reality shows from California. The Rosebud Motel is located in Orangeville, Ont. Tourists now seek out these locations, wanting to be seen and be filmed at the Rosebud Motel, at Bob's Garage and at the Café Tropical. I got as far as Season 4. The grand finale was Season 6, much to the disappointment and chagrin of fans. To make the lack of a seventh season even more painful, in September 2020 the series swept the comedy categories at the 2020 Emmy Awards. The cast were

shocked to receive so many wins, and hopefully it made them think about bringing the show back for season 7 or a spinoff. I'll be there!

There you have it. I enjoyed every minute of watching these movies, documentaries and television series and looking into their backgrounds and details—am I an anorak?

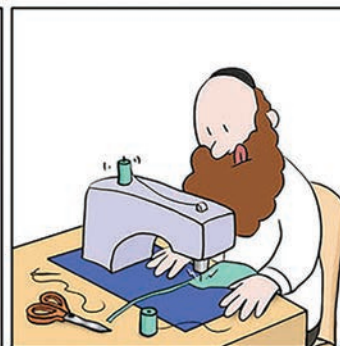


## HUMOUR!

Have you ever seen a sheet on  
a river bed?  
Or a single hair from a  
hammer's head?  
Has the foot of a mountain  
any toes?  
And is there a pair of  
garden hose?

Does the needle ever wink its eye?  
Why doesn't the wing of a  
building fly?  
Can you tickle the ribs  
of a parasol?  
Or open the trunk of a tree at all?

Are the teeth of a rake ever  
going to bite?  
Have the hands of a clock  
any left or right?  
Can the garden plot be  
deep and dark?  
And what is the sound of  
the birch's bark?



# PEER SUPPORT SERVICES

## 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**



"Being able to help someone else through a crisis also helps me. As a senior, I sense the loneliness and the invisibility people experience. I know when I have left a client or hung up the phone that I have made a difference!



**ESTHER, 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.



Jewish Seniors  
Alliance

## 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/](http://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:

- Advocating to both levels of government for an overhaul of the Long Term Care system.
- 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 seniors are facing due to the COVID-19 pandemic.
- Asking the City of Vancouver to allow seniors to apply for their provincial home owner grant in person rather than online.



**Jewish Seniors Alliance**  
SENIORS STRONGER TOGETHER

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

Name		Telephone
Address		City
Postal Code	Email	
Yes, I would like to Support JSA with a <b>One Time Donation</b> in the amount of:		
<input type="checkbox"/> \$18 <input type="checkbox"/> \$36 <input type="checkbox"/> \$54 <input type="checkbox"/> \$72 <input type="checkbox"/> Other: \$ _____		
Your monthly gift will bring steady funding to vital programs. I wish to make a <b>Monthly Contribution</b> in the amount of:		
<input type="checkbox"/> \$20 <input type="checkbox"/> \$35 <input type="checkbox"/> \$50 <input type="checkbox"/> Other: \$ _____		
Cheque enclosed for \$ _____ payable to Jewish Seniors Alliance of Greater Vancouver		
Credit Card # (Visa/MC)		Expiry Date /
Signature		
Please help save costs by signing up to receive tax receipts by email <input type="checkbox"/> Yes <input type="checkbox"/> No		
A Donation of \$18 or more will recognize you as a Member/Supporter of JSA which will allow you to vote at our AGM. A tax receipt will be issued for a donation of \$18 and up.		



# ADVOCACY: LONG TERM CARE URGENT AND NECESSARY CHANGES MUST BE MADE

Written by Tony DuMoulin

Jewish Seniors Alliance has recently submitted the following recommendations for reimagining and funding Long Term Care to the relevant public officials in both the Provincial and Federal Governments:

## 1 Increase direct care staffing in LTC homes

- The B.C. Health Ministry guidelines set 3.36 hours per day of direct care\* per resident as the minimum (without a pandemic) and public funding grants to facilities are based on that level.
- In fact, however, in 2018/2019 the funded direct care hours in the Vancouver Coastal Health Authority were only 3.19. Only 18% of facilities in VCHA met the 3.36 guideline.
- Some experts believe the proper number should be 4.1 hours.
- In short, there are inadequate staffing levels in most LTC facilities in B.C.
- And there is a need to ensure that all public funding for direct care is being spent on direct care.
- \*"Direct Care" includes: the health and personal care provided by Registered Nurses, Licenced Practical Nurses, Health Care Assistants and Resident Care

Attendants (3:00 hours per day); as well as Physical, Occupational and Recreational Therapists (0.36 hours per day).

## 2 Pay and train ALL workers in LTC facilities properly

- Public funding of LTC facilities is calculated using current union rates of pay and benefits for regulated workers.
- Registered nurses, licenced practical nurses, health care assistants, other regulated allied health disciplines, and food, laundry, maintenance and administrative staff: all LTC workers should receive union rates and benefits. Registered nurses working in LTC should be paid the same as their counterparts in Acute Care.
- There is a need to provide continuing education and training in the care requirements of the many residents with complex care needs and conditions, including their emotional and psychological wellbeing.

## 3 LTC facilities must increase and adjust their direct care staffing mix

- LTC facilities need more direct care workers from the allied health professions. 0.36 hours per person per day is inadequate for providing quality of life

care to the whole person.

- Studies have shown that recreational therapy in particular, which includes: Tai Chi, yoga, walking programs, ball games and dancing, produces increased movement, an improved ability to manage daily living, increased independence, and improvements in psychological, emotional and social wellbeing.

- In addition, beyond more direct care hours, LTC facilities also need infection control practitioners, human resources personnel, occupational health and safety experts and information technology experts.

## 4 We must reinvent the way care is delivered, starting with newly designed facilities

- We need to design a better way for residents to live a fuller life. We must move away from institutional "warehousing" to a newly imagined, person-centred physical environment, one that improves quality of life.
- A number of British Columbia LTC facilities are already implementing person-centered care. Their successes should be studied.
- New facilities should be designed in the form of self-contained homes for 10-14 residents.
- Each home would contain single ensuite rooms providing direct access to the outdoors and interior access to the common areas, which include a living room with TV, den, kitchen and eating area.
- Dedicated staff would work at only one home, thereby providing increased safety from infectious diseases, continuity of care and the possibility of more flexible, customized care to meet the needs of each unique individual resident.

In short, there are inadequate staffing levels in most LTC facilities in B.C. ”





- A survey of residents and family members in another jurisdiction has shown that the homelike domestic cluster model is popular and improves social engagement and psychological well-being.
- Direct access to the outdoors was shown to be very important, as well as increased interaction with residents in the cluster.
- This design also improves infectious disease control, allowing specialized outside care workers or family members to access a resident's room directly from the outside, thus reducing or eliminating contact with other residents and staff.

## 5 We must develop new protocols to accommodate safe family visits

- Designated family members who provide care and comfort to LTC residents should in appropriate cases be classified as essential workers and allowed an increased number of visits during pandemics.
- A balance must be found between the protection of residents and staff from an infectious disease and the beneficial effects on the psychological and emotional health and wellbeing of residents which results from being able to receive comfort and care from familiar and loving family members.
- Family care-givers can reduce the burden of health care aides by providing extra help with grooming, dressing and other personal care needs.

- Adoption of the homelike cluster design referred to earlier, with direct access to the outdoors, would greatly assist in allowing family visits to be safe.

## 6 We must establish province-wide standards for LTC delivery

- At this time there are inconsistent standards amongst Health Authorities, and a variety of contracts between Health Authorities and private operators, leading to inequities in funding allocations.
- British Columbians are entitled to expect a single set of standards for LTC delivery and its public funding, developed by the Ministry of Health in consultation with the Health Authorities, together with a province-wide standard contract (albeit one designed to accommodate special situations).
- Inspections for compliance need to improve and increase. Any operator who fails to meet the standards or comply with its contract should be held accountable and sanctioned appropriately or, ultimately, lose their public funding.
- All private facilities, whether for-profit or not-for-profit, should have uniform reporting requirements for measuring staff hours, revenues and expenses using accurate, verified data, together with uniform information technology systems for seamless reporting across the board.
- And finally, all financial reporting for publicly funded facilities should be available to the public.

## 7 We must find ways to access increased funding for these recommended Long Term Care improvements.

- Ideally, a major portion of long term care funding should be provided through Canada's national public health system, with each province funded through

increases in health care transfer payments from Ottawa.

- To accomplish this, the Canada Health Act would need amending to include, as was originally intended, long term care funding.
- National standards would need to be developed in consultation with the provinces' health ministries, and these standards would be enforced through the withholding of transfer payments for non-compliance, as is the case now for other forms of health care.
- In addition, the federal Infrastructure Program could be tapped for capital projects such as new and improved, net zero energy buildings and capital equipment.
- Both CMHC and BC Housing should be approached for grants and favourable financing.
- The BC Health Ministry, as well as other provincial ministries, need to expand their budgets for LTC.

- Municipalities could be asked to contribute after they have returned to pre-COVID revenues levels. The City could provide 60 year land leases like it has done for subsidized housing projects.
- Investment in for-profit facilities will need to increase (if such investors still want to invest), and not-for-profits will need to increase their philanthropic efforts.

At the end of the day, we are really asking all taxpayers to pay more to care for the older members of our society than they do now. There is no way to avoid it.

**Tony DuMoulin**  
is a JSA Board  
Member and Chair  
of its Advocacy  
Committee.



# ADVOCACY: GAPS IN SENIORS CARE IN BRITISH COLUMBIA

Written by Shanie Levin

On Tuesday, December 1st, the Council of Canadians and the B.C. Health Coalition held a webinar to discuss *Gaps in Seniors Care in British Columbia*. The moderator was Penny McCourt from Action for Reform of Residential Care (ARRC). The speakers included Scott De Long, Vice President of Community Health for the BCGEU, who spoke about community health care workers; Anita Dickson, past President of the Licensed Practical Nurses (LPN) Association of B.C. who concentrated on residential care, and Sheila Pither, president of COSCO, who spoke about advocacy with government agencies.

## THE PLIGHT OF IN-HOME CARE WORKERS

Scott DeLong made a number of points about the plight and lack of protection of community health care

workers. These workers who do in-home care have very little support. They are restricted as to timing and the help they can give to clients. Often they have only fifteen minutes to spend with the client and then must run to the next home. They do not have coffee breaks or even bathroom breaks included in their schedules. Their schedules can vary from day to day and there is no time to even chat with and get to know the client. These care aides often gravitate to residential care where they can have scheduled breaks and regular eight hour shifts. Changes should be made to fund these workers not the client. Recruitment and retention is a major problem, thus working against the concept of keeping seniors at home for as long as possible.

## PRIVATE VS PUBLIC ASSISTED LIVING

Anita Dickson spoke mainly about Assisted Living in residential care and the differences in private and public sector settings. The new model for this type of setting is “the right to live at risk”. However, even though the regulations for assisted living call for seniors to be able to do all their own self-care, many that are admitted to for-profit homes are not completely capable and independent, thus,

they need more assistance than the staff are able to give. The point is that all of those seniors aging-in-place in supportive housing need an exit plan that should be set up at the time of placement. The COVID pandemic has brought to light many of the gaps in service and staffing and has highlighted the increase in falls and other problems with isolation. More non-profit homes and better staffing would help with aging in place.

Sheila Pither of COSCO explained that they act as advocates to government on seniors issues. They are an umbrella organization and many seniors organizations are COSCO members. They decided to look at the quality of care in seniors homes and presented a report to both the Federal and the Provincial governments. They asked that the information be shared with the Opposition Parties. The Speech from the Throne mentioned the development of national standards-of-care for seniors homes. However, because it is under provincial jurisdiction, any standards would have to be adopted by each individual province. There is a scarcity of beds in long term care homes, this fact has been underlined in reports for many years by Roy Romano, Pat Baird and Isobel Mackenzie. The prevailing greed of the privately-run homes has created most of these problems. COSCO’s goal is for all facilities to be public. They will continue to pressure all levels of government to increase supervision and to look to a future with proper care for our elders.

The talks were followed by a question period. Each of the speakers raised important points about the gaps in services that have been brought to the public’s attention by the pandemic. Hopefully advocacy to all levels of government will keep these issues in the public mind so that these gaps can be addressed and rectified.





# REINVENTING PEER SERVICES FOR JSA

Written by Kenneth Levitt

Dear Clients and Volunteers, This column is being written while the Pandemic is still at its peak. Hopefully, by the time this issue of *Senior Line* is published, there will have been major progress and the establishment of a “new normal”.

To say that Covid-19 has wreaked havoc on British Columbians would be an understatement. The virus has disrupted anything that we would call the normal activities of daily life. Most of us have had to make major compromises: where we go, what we do and how we can avoid getting the terrible virus. These adjustments have had a major impact on JSA clients who are already compromised by loneliness and isolation.

How we serve our clients and how we support our volunteers has undergone major changes—let’s give it the label “Reinventing Peer Services”. In order to better understand what has taken place I interviewed Charles Leibovitch, JSA Senior Peer Support Services Coordinator and Grace Hann, JSA Trainer of Volunteers of Senior Support Services.

## IN THE BEGINNING

By mid-March, 2020 the first signs of Covid-19 began to show its ugly head. The lockdown left clients and volunteers absolutely unprepared to the “nth degree”. Persons who were already isolated and lonely found themselves even more isolated and lonelier. As time progressed clients were cut off from family members who might have supported their relatives through personal

contact and social events. This was especially devastating for persons without family. In many situations volunteers were their primary contact; their life line! Being alone undermines one’s mental health. Being alone exaggerates one’s fear of Covid-19. Most of the clients were cut off from community programs, adult day care. Spouses who usually spent time with their spouse in a long-term care facility were also cut off. Simple activities like going for a walk and sitting on a bench were curtailed. Elders had depended on having that human connection, having that human touch makes us feel needed and whole.

## VOLUNTEERS MEET THE CHALLENGE

The changing scene called for quick action initiated by Grace and Charles. Instead of personal visits, the telephone would become the prime instrument of contact between volunteers and their clients. It was necessary to contact the volunteers quickly. Support for the volunteers would be provided by Zoom. This necessitated a steep learning curve for volunteer and client. After all, making and keeping the connection was critical. The three services, Peer Support, Friendly Visits and Friendly Phone Calls, had to be reassessed in terms of the neediest clients. Each of the three services’ volunteers had different levels of training by Grace.

In some situations a Certified Peer Support Volunteer was assigned to a person who ordinarily would have had contact with a Friendly Visitor

or a Friendly Phone Caller. Moving from in-person contact to impersonal contact was a major transition—almost like re-inventing how support was to be provided. The JSA volunteers made the transition like veterans, with the extraordinary support of Grace and Charles. There was an increase in the contacts between volunteers and clients and an increase in Zoom Online meetings to support the very special work being carried out by the volunteers.

## SUPPORTING THE VOLUNTEERS

Grace and Charles organized many activities including; outdoor picnics, weekly webinar seminars, a Chanukah party with a singalong and group support meetings every 3 weeks. The spirit and ‘esprit de corps’ by the volunteers has been amazing. Volunteers will send cards to their clients as an additional way to keep in contact. Who doesn't like to receive mail?

## CONCLUSION

Challenging times require challenging solutions. Charles and Grace rose to the challenge and proved that with dedication, imagination and determination, obstacles can be overcome. When the Covid-19 vaccine has been fully distributed, we will establish a “new normal.” This will present JSA, Grace and Charles, and the volunteers with a new set of issues and situations. And, as the song goes “We Shall Overcome,” so they will face these challenges with creativity, empathy and caring.



**Ken Levitt** is a Past President of JSA, former CEO of Louis Brier and a past Chair of Camp Miriam. In 1985 he co-edited,

*The Challenge of Child Welfare*, the first textbook on child welfare in Canada.

# SUPPORTING SENIORS AND MEETING OUR OBJECTIVES AT JSA

Written by Margot Beauchamp

In mid-August, I was hired as the Quality Assurance Liaison for the Jewish Seniors Alliance of Greater Vancouver. Securing government funding from Vancouver Coastal Health (VCH) for our Peer Support Services (PSS), meant we were responsible for establishing a system whereby we could prove we were meeting the objectives of our mission statement of enhancing the quality of life of all seniors, by providing peer support services, advocacy for seniors' issues, education, and outreach.

We knew we were doing an excellent job of supporting seniors from the many positive comments we received from our client surveys, but going forward we had to demonstrate how we were meeting our obligations. Our first *Annual Quality Assurance Report* was submitted to VCH on November 13th, 2020. We informed them of the work that had been done in PSS from October 1, 2019 to September 30, 2020 and included: a summary of quantitative data for the 12 months, information about the Volunteer Education and Support Sessions as well as Community Building Activities over the last year, qualitative data and comments from client surveys, a narrative analysis of the data collected and an outcomes plan for the coming year. We also provided information about the new Quality Assurance data collection system that has been implemented.

Grace Hann and Charles Leibovitch, our amazing PSS staff, support an average of 110 clients and 60 volunteers per month. Since COVID-19 over 1000 client contacts were made over the year

by our Certified Peer Support volunteers, our Friendly Visitor and Friendly Phone Call volunteers and by our staff and board members. Despite COVID-19 and the need to provide services on-line via zoom, our staff conducted both Friendly Visitor and Friendly Phone Call training, and PSS Volunteers required emotional support/communication training courses and added 30 new volunteers. Over 30 Volunteer Education and Support sessions were offered via zoom and an average of 33 volunteers per month attended the events.

The work being done by the Peer Support Service Program is an emotional lifeline for the many clients we support. ”

Staff continue to participate in more than one community partnership program including: South Vancouver Seniors Network (SVSN) Weekly Webinars co-hosted by JSA's Peer Support Supervisor/Trainer Grace Hann, on a panel with MLA Michael Lee. The network is a collaboration of service organizations working together for seniors, hosting webinars on Zoom, to enable seniors and caregivers to connect and find information to help with COVID-19. During the pandemic, they hosted several community building and advocacy sessions, such as: *Aging Across Cultures* for 20 Seniors' organizations;

used a Spanish speaking employee to assist with translation so that some Spanish volunteers could join the Friendly Visitor training and many other important initiatives.

## Here are just a few of the outstanding comments we received from our client surveys:

1 JSA is a fabulous organization, my life has become much fuller. I am amazed that your volunteers have been so helpful. I am being supported by a mental health team but having someone who listens to me without judging really helps me. When I feel I am in a crisis, I call Grace and we talk through it.

2 Even with the onset of the virus, I have two volunteers who call me regularly, this has been a real blessing. I am not sure what I would do right now if I didn't have their continued support.

3 Likes the continuity and graciousness of her volunteer and very attentive, a great relief. Always helpful.

The work being done by the Peer Support Service Program is an emotional lifeline for the many clients we support. The pandemic has been particularly hard on seniors, who already experience loneliness and isolation. We know we are doing a small but mighty part to help them to feel connected and valued during this exceedingly difficult time.

### Margot Beauchamp

is a senior management professional with over 35 years of experience in diverse nonprofit organizations including: executive and project management, fund development, communications, facilitation, strategic planning and program operations. Margot works for JSA as the Quality Assurance Liaison.





# PEER SUPPORT SERVICES

## VOLUNTEER PROFILE: MARY BROOKS

Interview by Charles Leibovitch

Mary Brooks was born in Ottawa, and moved at age three with her family of four siblings to Saskatoon. Her parents instilled in her a love of learning. Her father was an entomologist who worked for the federal government at the University of Saskatchewan. Her mother worked at home caring for her family.

Mary's early experiences at school left her wondering about the role of teachers and, by age 11, she decided that when she grew up she would train as a teacher and help children enjoy their school experiences. After high school, she completed a two year teachers' permanent certification program and decided to teach in northern schools. At that time, students in remote communities were being taught the same curriculum as students in urban areas even though the texts provided had little relevance to students who had not travelled out of their communities. For example, these students did not understand the lives portrayed in the *Dick and Jane* readers or the relevance of other urban and non-Indigenous experiences. Mary's focus with her students was to engage them in their own learning and encourage their creativity and imagination. She taught in northern Saskatchewan, Manitoba, Alberta, and the Yukon.

During this time, Mary got married and had two daughters who enjoyed living and learning in the North before moving South to continue their education. In Fort McMurray, where she lived and taught for 20 years, Mary volunteered as an accompanist for choirs and individuals and spent time as a volunteer at "Some

Other Solutions" (SOS), a volunteer-run crisis line.

Later, Mary decided to return to university to increase her understanding of the education system and how it could be improved. In 1996, she went to the University of Alberta in Edmonton and earned a Bachelor of Arts (Honours) in Women's Studies and a Master's in Adult and Higher Education. In addition, she added to her teaching experience by working with adult English as an Additional Language (EAL) students and those in the university. In 2001, she moved to Vancouver to complete her PhD in Education at the University of British Columbia, looking at how education and society influence each other. She taught in the Teacher Education Program, encouraging new teachers to think about social justice in education and helping them to develop a strong sense of personal and professional ethics.

In 2014, Mary retired and gave herself six months to relax and explore volunteer opportunities. As she lives in the West End, she explored options at the West End Seniors' Network (WESN), took the volunteer senior peer support training, and began working with seniors in that neighbourhood. Greatly enjoying the work, but wanting more education and training, she was happy to see the JSA ad for senior peer support and took the training course with our peer support volunteer trainer and supervisor, Grace Hann. **Mary describes this training experience as amazing, in part because of its emphasis on listening, a skill essential for successful peer support volunteers but one that is seldom taught**



**in any formal setting.** She appreciated Grace as the trainer because of her ability to show, in a concrete way, the skills she was teaching (that is, she could "walk the talk") and her compassion, empathy, and sense of humour while working with the volunteers. The on-going support and education that is offered keeps her skills fresh and lets her know she always has help, should she need it.

Since then, Mary has continued to be a Certified Senior Peer Support Volunteer for Jewish Seniors Alliance Peer Support Services and continues to explore new learning opportunities—taking on-line courses in various subject areas and, for the first time in her life, taking singing lessons and exploring many musical genres, including opera, baroque music, and music by women composers.

"Being a Senior Peer Support Volunteer is the perfect activity for me," Mary says. "It combines my enjoyment of people, my desire to help make the world a better place, and my love of learning."

**Charles Leibovitch,** MSW, is JSA's Senior Peer Support Services Coordinator. He initiated the Program in December 2011. He has a long history of caring for seniors.



# A PATIENT'S VIEW OF THE COVID-19 EXPERIENCE

Written by Gloria Levi

I was 89, with a heart condition—three years after open heart surgery. I suddenly realized that I was having increasing difficulty with my breathing. I automatically presumed that my heart was acting up. However, my granddaughter, the nurse, insisted that it was Covid-19. “It couldn’t be,” I replied. “I’ve been so careful.” Finally, after two weeks of increased breathing difficulties, I recognized that my breathing difficulties had become very severe. I relented and agreed to go to the hospital.

I entered Vancouver General Hospital April 1, 2020. As I slipped off all my

clothing and donned the hospital gown, I realized I was shedding my personality and entering that institutionalized depersonalized state of ‘patient’. In spite of my computer, ipad, and cellphone, I was alone. Health care personnel only entered the room when they had a specific function to perform, donned in their protective gear and then left. My three adult children FaceTimed with me every day. But I was struggling for every breath and growing weaker; complications setting in. I felt profoundly alone.

I was constipated and tried every suggestion to improve the situation, to no avail. I forced myself to eat food which was atrocious. Walking with assistance three times a day from bed to bathroom was exhausting. Day turning into night and night into day made each day seem maddeningly long. One nurse suggested I might have sleep apnea. I worried about all the new diagnostic labels the health care system might throw on me. I needed oxygen

and was constantly looking at the oxygenation markers to see how low they were. I couldn’t go home until I could breathe on my own without oxygen. Try as I would, I could not take a deep breath properly.

Breath! What is this phenomenon ‘breath’? “God breathed into Adam’s nostrils and the creature became a living being.” Breath meant life! The last breath a person takes before death is an exhalation, to expire, not an inhalation. I could not inhale without help from oxygen nasal prongs. I was trying so hard. I was so tired of trying. I said to myself, “I could just let go? Just let the exhalation come and it would be over. I closed my eyes to see what that would feel like. Peaceful... but dark. I couldn’t be in darkness. I hungered for the blue of the sky... the colour of the inlet waters from my window, the green of the trees, the dark reds of rooftops...for the promise of the rainbow...the WONDER of this world! The preciousness and beauty of this planet. And I knew I wanted to live, to love, to engage.

By day 14, I encountered a physio who worked patiently teaching me how to control my breathing, to take air to the very bottom of my lungs. I could change the oxygenation markers on my own! On day 16, I left Vancouver General and returned home. I had overcome the coronavirus.



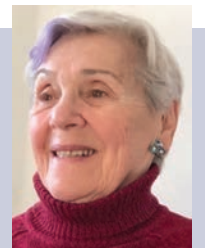
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## Gloria Levi is

a local activist and writer. She worked as a gerontologist and is a lifelong student of Jewish texts and the Hebrew language.





# SHALOM, GOOD BYE

Written by Pnina Granirer

‘Six to eight months’. These words, uttered softly, almost apologetically by the young doctor, hovered for a second in the air of the small examination room, like stones on their way to the target, only to fall heavily on our beating hearts. Six to eight months. The room was warm, but a bitter cold spread through my body. Was I hearing right? Time stopped. Not even one year? Could this be true? I looked at my husband sitting next to me. What was he feeling, what was he thinking as these words were said, heralding the finality of impending death? Of course, the doctor continued, we’ll begin with treatment right away, to make the process easier.

We left the office silently, holding hands along the hallway and into the parking lot and drove home. There was nothing to say. In one short instant, my husband’s death sentence had shattered our lives. Ed was an optimist. He never complained, never felt sorry for himself and kept repeating that he will be around for more than one year. At 85, he had had a good life, had been lucky during difficult times and had brilliant achievements in his career as a mathematician. We decided to keep the dire news to ourselves, not even telling our sons. There would be enough time for grieving, we thought. The chemo treatment began and later radiation. Fortunately, there was no pain, and we continued with our lives as if all was well.

Eventually the cancer began rearing its ugly head. Eating became more difficult and Eddy lost weight. We saw our family and friends as usual, keeping the distance during COVID 19; we went for

walks, but then we had to stop. People began noticing the weight loss and asked questions. Our sons became concerned seeing their father becoming thinner and thinner, but he dismissed them all, pretending that he was just fine.



*Ed, Study by Candle Light, 1967*

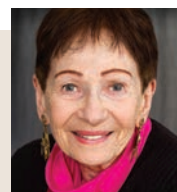
He never seemed to accept the fact that he was dying and never talked about it. I felt helpless, not being able to help my husband while he deteriorated day by day. Even so, he spent much time working on his latest mathematics research paper, which he published one month before he died. Eddy had taught in the Department of Mathematics at UBC for most of his life and continued his research after he retired. He was dedicated to his work, while never talking about his impressive achievements. Modest to a fault, he was even embarrassed when he was addressed as Dr. Granirer.

When his condition became obvious, he decided that it was time to let our family and friends know. The doctor’s prophetic

words had come true: it was August, the eighth and last month. Helplessly, I watched Eddy quietly fading away. I tried to encourage him to eat or drink something, only to have him respond with a guilty, sweet smile, that he could not. He became so weak that he could walk only with great difficulty, until he could not walk at all.

The Cancer Clinic and the doctors were incredibly supportive. During the last 7 days we received round the clock care, so our family could spend time with Ed. Our sons reminisced about their childhood and the wonderful things they did together with their father - and he smiled. On August 31st, at 9 pm, the nurse called. It’s time, she said. I rushed to Eddy’s side, held his hand and kissed him. His pulse got weaker and weaker, until it stopped. I felt completely numb. Although expected, my husband’s death felt unreal, impossible to accept. While feeling strong caring for him, I now felt weak, helpless, living through the days like an automaton, dealing with paperwork and arrangements. At times I felt resentful that he had left me and wished that I could take his place. Thankfully, my family helped enormously; friends left food and flowers at my door and sent a deluge of cards and donations in Ed’s name.

But in the evenings I am alone; Ed’s presence still whispers through the walls and his loss weighs heavily on my heart.



**Pnina Granirer**  
studied at the Bezalel Art Academy in Jerusalem. Her works

are found in numerous public, private and international museum collections. Her book, *Light within the Shadows; a Painter's Memoir* was published in 2017. Visit [www.pninagranirer.com](http://www.pninagranirer.com)



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# HOSPITAL AT HOME

Written by Anton Grunfeld

When we are sick with an acute illness, are we ready to be treated in our own home instead of being admitted to a hospital? Would we trust that we would receive equivalent or better care in our home? Would the outcomes be better? Are we convinced that, although the decision to start such programs is typically driven by the need to increase acute care capacity at lower costs, the care we receive will still be excellent, and at least match the care in a hospital?

In mid-November 2020, amid a surge in COVID-19 infections and an increase in the number of patients requiring hospital admission, British Columbia opened its Hospital at Home (HaH) program. This pilot program has been two years in the making and is the first of its kind in B.C. Initially proposed by the two physicians who now lead the HaH program, Dr. Elisabeth Crisci and Dr. Shauna Tierney, the program was started at Victoria General Hospital with the addition of nine “virtual” beds. A small team of physicians, nurses, pharmacists and other personnel provide around-the-clock in-home care and treatment with advanced equipment and technology to patients who would have otherwise been required to be admitted to hospital for acute care.

## ORIGIN AND HISTORY OF THE HOSPITAL AT HOME PROGRAM

The concept of Hospital at Home is not new. It originated 60 years ago with Hospitalisation à Domicile in France. It has since been studied and implemented with promising results in a number of other countries. Hospitalisation

à Domicile was intended initially to provide care, including specialist care, at home for certain types of patients who traditionally received care and treatment in hospital but who opted, with the support of their families, to be cared for in their home for a limited period of time.

Today, Hospital at Home programs aim to address the needs of two distinct groups of patients: patients who require hospital admission for an acute illness (**hospital avoidance**) or patients who could be discharged early from the hospital provided hospital level care was available at home (**early discharge**). Patients typically admitted to HaH care include those with Chronic Obstructive Pulmonary Disease, congestive heart failure, patients recovering from a stroke, participants with a (sudden or short-term) medical condition such as infections or Deep Vein Thromboses and who are elderly. Some programs involve mainly community-based nurses and physicians to provide care while others utilize more extensively hospital outreach services, including hospitalists and specialist physicians. Several large health systems in the USA, including Adventist Health, Intermountain Health Care and Mayo Clinic have launched HaH programs during May-June 2020.

## HOSPITAL AT HOME AS COMPARED WITH INPATIENT HOSPITAL CARE

Scientific reviews of studies of patients admitted to HaH have not convincingly shown that they had better, equivalent or worse health outcomes compared with patients receiving inpatient hospital

care, nor have they clearly shown a reduction or an increase in costs to health services. However, admitting patients to HaH increases their chances of living at home at six months’ follow-up and patients who receive care at home were more satisfied than those who are in hospital.

## HOSPITAL AT HOME PILOT PROGRAM AT VANCOUVER GENERAL HOSPITAL

In the pilot program based at VGH, nurses will visit patients every day and doctors will assess patients’ conditions, either in person or over the phone, every day as well. HaH is voluntary and at any point patients can decide to continue their care in the hospital instead. While participating in the program, you are still considered a patient of the hospital and there is no cost to the program for patients, including medications and transportation to and from the hospital or for things like x-rays or scans. Program leaders estimate that about five to 10 per cent of acute-care patients are eligible for the HaH program, but they must meet certain criteria and live within a 15 minute drive of VGH.

Physicians and specialists can call and refer patients for HaH but not everyone will qualify for the program. There are specific clinical criteria, including requirements that the illness must be a known diagnosis and doctors must know what the clinical course of action will be like. There must also be a caregiver in the home that can help the patient.

The program appears to be well thought out and well resourced. We wish it great success and hope that a similar program will be offered to those of us who are living in the rest of the province.

See page 39 for author biography.

# CARVING A PATH TO HAPPINESS

MICHAEL H. COHENE

Written by Larry Shapiro

Allow me to start at the very end of the interview when I asked Michael H. Cohene, an accomplished wood carver and current president of the Richmond Carvers Society, how, after his first seventy-five years on earth he would describe his overall state of being. Mike's response was quick and spontaneous as he enthusiastically declared "I am a very happy man". So, now that there is no mystery as to how his story ends, I am going to attempt to follow the trail and discover the twists of fate that lead to this rather envious result.

The first twist of fate: Born and raised in Montreal, Michael, after earning an MBA degree from Sir George Williams University, successfully found employment with a good salary in Vancouver. He enjoyed the prospect of travelling throughout British Columbia. Two years later fate took another unexpected twist. Michael's decision to go horseback riding led to an accident involving him, the horse and an immovable tree. I'm sure you can all guess who got the worst of this collision. The heavy damage to Michael's knee resulted in him undergoing two surgeries. Enter Mary, who was Michael's nurse for the second procedure. It was a classic case of mutual love at first sight. Michael, himself being nobody's fool, wisely recognized the golden opportunity which led to a long, happy

and fulfilling marriage with three daughters and two precious grandchildren.

Michael explained that the time he spent lying in the hospital had given him the opportunity to reflect on his life. He realized that he had not done much travelling. So why not take a break and fulfill his desire to see the world. Off he went with his roommate.

After a month they met up with Mary in London who had left her job at the hospital. Together they hitchhiked through Europe; a month later they found themselves in Greece. A friend had spoken to Mary about Israel, a place Mike never had any inclination to visit. Mary asked the life changing question "You're Jewish, aren't you, Michael?" They agreed to go to Israel. Upon docking in Haifa, having been advised that upon request, the passport control officials were prepared to stamp one's

embarkation card rather than the passport, Mike proceeded to make that request. The enthusiastic official responded by saying "Your name is Cohene, be proud," and proceeded to stamp his passport THREE times. Another turning point in his life. Mary and Mike worked on a kibbutz for almost a year. Upon return to Vancouver they discovered that his job at the Sweet Sixteen Stores had disappeared; out of business.



Pair of Sandhill Cranes II



Josh's Silver Creek Rainbow Trout



Sockeye



Brown Trout with two juveniles





Chanukiah



Over the course of their married life, Mike and Mary have made 35 visits to Israel since their first visit in 1970.

Mike began working for Fields Stores and Mary decided to continue her nursing career in cardiology which necessitated the purchase of appropriate uniforms. They drove downtown to the only uniform store in Vancouver. It was dingy, dusty and truly an uninviting place. Mike decided then and there to open his own uniform store. With Mary's encouragement and the advantage of an excellent partner, Dr. Sam Winter, he launched Image Uniforms on West Broadway. Twelve successful months later, he decided to devote himself full time to the business. Mike left his job at Fields and amicably bought out his partner. After thirty-nine years of building up the business, Mike decided to retire from the business. He would search for something new and different.

The stage was set for another life changing event. While Michael was meandering through a Farmer's Market in Richmond, he found himself fascinated by a wood carving demonstration. Noticing him admiring the carvings on display, a gentleman approached him and said "You can do this too". "There is no way I could ever do this", was his response. This fellow then asked him for his phone number and told him he would contact him in September when the schools re-open because the wood carving classes take place in the woodworking shop at a

Richmond High School. As September rolled around, he received an invitation to visit the woodcarving class and was shown how to carve a bear. "I was hooked and really got into it, carving Judaica and small ornamental objects advancing my repertory to include fish and wildlife sculptures", Mike said. He enjoyed the creative experience so much that he began investing in some knives and tools which was the beginning of his own carving shop. Being an avid fisherman, having spent many memorable days fishing with his Dad and brother Lee, he began concentrating on fish carvings. Later he participated in advanced carving workshops with the world master carver, Dale Barrett in Redmond, Oregon. With the excellent technical training and the course he completed at Emily Carr University of Art and Design learning the skill of airbrushing, Mike began to specialize in fresh and salt water fish sculptures. Having learned how to visualize and use reference material, Mike now finds many of his subjects by observing objects that he sees during walks on the beach. One of his creations of which he is particularly fond and proud of is titled *Genesis* depicting Adam and Eve, which, much to his delight, took first prize in a woodworking competition. Mike has won several woodcarving awards and has had many requests for commissions. His

woodcarving interest and skills may have come late in his life, but will continue to be an important part of his life forever after.

It wasn't long before he was made aware of an opening for a Deputy District Electoral Officer with Elections BC, he applied and was accepted within ten days. Shortly after that, one of the other electoral officers mentioned that he was engaged by the Federal Government with Elections Canada. There was an opening coming up in Richmond where he lives and that one of the criteria for the job was being a resident of Richmond. Mike was successfully appointed Returning Officer for Steveston – Richmond East and was hired by the Federal Government, Elections Canada.

With his new civic responsibilities and his other part time job as the Official Representative for United Nations Postal Administration for the Pacific Northwest region and all of Canada, Mike still finds time to engage in his passion of woodcarving. Mike tells me that if anyone is interested in exploring the world of woodcarving please feel free to contact him. Enjoy a virtual tour of some of his work at [www.mikecohene.com](http://www.mikecohene.com) and remember those words which launched Mike's carving career, **you can do this too!** Michael Cohene, President Richmond Carvers Society is a very happy man.

# CZECHOSLOVAKIA, 1968: ON THE RUN, BECOMING REFUGEES

Written by Anton Grunfeld

**M**y brother and I ran away from home. I was 21 years old and my brother was 19. It was 1968, Alexander Dubcek had come to power in Czechoslovakia and the Prague Spring was wreaking havoc with communism everywhere.

Romania was at the time one of the poorest countries in Europe. Back in history the country had been a remote province of the Roman Empire. That's where Rome sent their exiles. Ovid, the poet, died there, in Constanta, a port by the Black Sea. Invading hordes, from Goths to Huns to the Ottoman Turks rode in moving west. Some of them lingered for centuries, others ravaged the country on their way back east. More recently, there wasn't much democracy in the nineteenth or twentieth century. The country was ruled by an imported German kingly family, a branch of the Hohenzollern dynasty, until 1948. Romania, being on the losing side in WWII was, in 1968, still paying heavy war penalties to the Soviet Union.

Then we felt a whiff of freedom. In Cluj, where I lived, people started meeting, some in the street, some in

homes, but openly, discussing political events. It was not only about Prague and the Prague Spring but about student uprisings in Paris and Berlin, the war in Vietnam and America. Even at school my solidly Marxist political science professor noted that political debate was also worthwhile, not only the memorization of the truth of Marxism-Leninism. Suddenly there was hope for change.

It didn't last long: the Soviets and other Communist Bloc countries' armies invaded Czechoslovakia in August 1968. My brother and I decided to try to leave Romania, a dangerous move where such attempts were illegal. Romania was bordered by communist countries all around and getting a visa to go to the West was impossible. But there were rumours that Austria had opened its border with Czechoslovakia. That people could just walk across without a visa to get to the West. So here it was, finally, a way of getting out, if we could just somehow get to Czechoslovakia.

It took three months of waiting for the visas to Czechoslovakia but they finally arrived in early December. Could we



Anton and Mihai Grunfeld

still cross the border to Austria? No one knew and few people dared to talk. We took a train to Bratislava, a city on the Danube at the juncture of Czechoslovakia, Hungary and Austria.

It was a cold wintery day, the town was covered in snow. Where was the border with Austria? We found the highway leading to the border and hitched a ride to the border control. The guard looked at our passports: green, bulky Romanian passports, valid for one trip to Czechoslovakia. At that time there was no visa required for tourism between Austria and Romania, provided you had a valid passport. There was nothing in our passports mentioning Austria, the guard pointed out, so no, we couldn't get across. We were not arrested for trying to cross the border illegally either, as we had feared, so it was a draw.

And yet, the Danube was right there, looking frozen solid and Vienna was merely 60 km away. Could we cross the Danube? Was it frozen enough? Could

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My brother and I decided to try to leave Romania, a dangerous move where such attempts were illegal. ”

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we go at night? Would the guards shoot us? We didn't know and there was no one to ask. We opted instead to go to Prague and try our luck there.

Prague at the end of 1968 was a somber city. Gone was the vitality of the previous spring, everything looked grey and sad. There were few people in Wenceslas Square; the Russian soldiers were not visible but the bullet holes in the surrounding buildings were witnesses to their presence. We decided to try to get an Austrian visa and cross the border that way. But could we persuade the Austrians that we deserve a visa when Vienna was already invaded by refugees. There were refugees from everywhere. Czechs and Slovaks fleeing the Soviet invasion, East Germans and Hungarians escaping to the West, Jews from the Soviet Union and other communist countries, lately

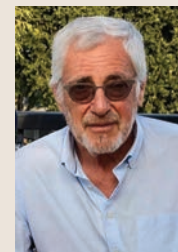
some Polish Jews, suddenly identified as Zionist enemies of the state and therefore expelled from Poland and still many of the Hungarians left over from the 1956 Revolution.

How could we improve our odds of getting a visa? Perhaps a fictitious uncle, with an invitation to spend our holidays in Vienna, would be helpful. The Telephone Palace in Prague had phone books from all the major cities in Europe. We selected a random Mr. Grunfeld, from Vienna, from the phone book. Took his address and phone number and headed to the Austrian Embassy. We filled in the forms, paid a small fee and left our passports, to be picked up with the visas in the afternoon.

Could it be this simple? The embassy people almost certainly knew that we

were frauds, didn't they? They would call the Romanian Embassy. The passports were not really valid, were they? What if they just sent them over to the Romanian Embassy, with us in tow? Now that they had our passports we were sure we were heading back home facing years in jail.

We returned to the embassy in the afternoon. The passports were there waiting for us, with valid visas. Next morning we took the train to Vienna. And thus we became refugees.



**Anton Grunfeld** is a retired emergency physician. He is a board member of the Janusz Korczak Association of Canada.



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# SCHLEPPING MY 4 BY 5 VIEW CAMERA IN LA IN THE SIXTIES

Written by Dan Propp

Back in the early nineteen sixties, I used to schlep a huge 4 by 5 view camera all over the city of Los Angeles. As a photography student at Art Centre, at the corner of Third and Las Palmas, capturing the visual feel of the city, especially on a smoggy day was not exactly a picnic in black and white, with sheet film while composing on the ground glass, upside down with a black cloth over one's head. It was not easy on the neck either with a red filter, perhaps a yellow filter, there was no such thing as a smog filter.

Once in a while I preferred to walk up to Hollywood Boulevard with an old 35 mm camera to see what concepts might develop, forgive the intended pun! At the corner of Hollywood and Vine, across from the Capitol Records building (does anybody still remember what a record is?), there was a building that was then called Hollywood Palace Theatre.

In the 1960s ABC TV network used the building to broadcast variety

shows. Tickets for audiences were free, of course, I would go. On one such occasion, I forgot my camera but the nostalgia of watching one of the stars dancing was overwhelming, except there was no mule. Can you guess who the dancer was? Did you ever see the TV series *Francis the Talking Mule* starring Donald O'Connor?

There have been many name changes to the building. One such name change included the "Jerry Lewis Theatre" as it hosted Lewis's ABC television variety show. This time I brought the little 35 mm camera along. And that's the image you see here today.

Growing up as a kid in Gibsons Landing, there was only one movie theatre. You could see movies like *Ma and Pa Kettle* and *The Bowery Boys*. When the picture show featured movies of Martin and Lewis, everyone went crazy. Here are the lyrics to one of my songs that might bring back a memory or two.

When Jerry Lewis was still playing the loveable fool and Dino was being, oh so cool, some of us were still in elementary school. To use a poor English phrase, 'thems were the days'. Oh, there was love and war, song and dance, and then per chance, an empty popcorn bag

might go bang and plenty of sugar when Doris Day sang "Sugar in the Morning, sugar in the evening won't you be my sugar and love me all the time." There were cartoons and previews and movie tone news and all those cowboys that could never lose. There were stars like Bob Hope, Marilyn Monroe, CinemaScope and TODD-AO, Ginger Rogers, and Fred Astaire. There were stars everywhere.

Anybody remember the song *Daisy, Daisy Give Me Your Answer Do*? Since we're on the topic of cameras, films, bad puns and developments such as digital instead of film, I fixed the words into a daisy of a change - enough to make you shutter.

Kodak, Kodak, you and most films have practically gone. Come back, come back so we don't always have to turn that digital camera on. I miss all that processing and waiting - the magic of anticipating - making all those human mistakes. Today for goodness sakes those digital cameras never do anything wrong. Like William Bendix used to say in that TV series in black and white, "what a revolting development this is".

Don't tell anybody okay, but I still miss my 4 by 5 view camera and schlepping it up and down the streets of Los Angeles. The nineteen sixties still seem like yesterday, already.

**Dan Propp** is a retired school teacher and photographer. A self-taught musician, he sings the old time songs – with accordion – at seniors' homes throughout the lower mainland. Visit [www.Nostalgicroads.Weebly.com](http://www.Nostalgicroads.Weebly.com)



Jerry Lewis live at the Hollywood Palace Theatre, 1960s  
(photo: Dan Propp)



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