



SAMAA

South Asian Muslim Association Of Australia Inc.

Mission Statement:

"To evidence the Islamic spirit of love, compassion and charity in providing a range of services to the aged of South Asian Muslims in NSW that best meet the physical, spiritual, cultural and emotional needs of the individuals, their families and the Muslim community"

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AGEING POPULATION MISSED BY ABBOTT'S MINISTRY

As Australia faces the challenges of an ageing population, Tony Abbott's decision to lump aged care and ageing into the Social Services portfolio could spell trouble for the future of older Australians, wrote Emily Millane on ABC News.

We reproduce below a few more experts from her article.

Ageing and aged care are now silent in the portfolio mix, subsumed under 'Social Services'. This says to incoming minister Kevin Andrews and assistant minister Mitch Fifield that these areas are only part of his job, not his primary focus. This says to key stakeholders in aged care that their sector is going to have to fight for a seat at the table, rather than being guaranteed one. Most importantly, this says to older Australians that their wellbeing is not a priority for the Government. If something is a priority you name it as a priority.

The decision to bury ageing and aged care in 'Social Services' is bad for all Australians, not just older Australians.

One in 4 people aged 65 and over by 2056 and no minister for ageing. At a time when Australia's policy approach to longevity and ageing needs to be front and centre of any government's agenda, the Coalition has thrown ageing into a portfolio more accurately described as the Department of Odds and Ends.

An inadequate aged care system has a ripple effect on society. It affects the wellbeing of older Australians, which in turn affects their families and friends. Speak to the son or daughter of someone with Alzheimer's whose carers try their best but are not adequately educated in Alzheimer's care.

But perhaps the greatest risk any government runs is failing to develop its thinking and marshal its resources to seize the opportunities presented by an ageing society which is living for longer. This is the first time in our history we have had two generations of people living in old age - those in their 60s and 70s and their parents in their 80s and 90s. It is also the

first time we have the ability to lead a more healthy and engaged life, across a longer span of life. All Australians stand to benefit from this.

By siphoning off and burying ageing in its ministry the Coalition risks developing a piecemeal policy mix which is a glaringly inadequate response to the pressures created by demographic change. It also risks missing the economic and social opportunities of longevity and an ageing society. To put it in the language of Tony Abbott's election night speech, that would be loss 'for all Australians'.



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SAMAA'S EID MILAN FUND RAISER

South Asian Muslim Association of Australia (SAMAA) celebrated the annual event of Eid Milan as its first fund raising event at Marana Auditorium, Hurstville on Saturday 24 August 2013. A large audience packed the huge hall and participated in all activities with enthusiasm and joy. A number of parliamentarians, representatives from aged care agencies, Muslim community representatives from various organisations along with many SAMAA elderly & their families and a very large number of South Asian Muslim families attended the evening. A team of dedicated SAMAA volunteers ensured that all felt comfortable and the programme ran in an orderly manner. NSW Minister for Ageing & Disability Services Hon. John Ajaka also represented the NSW premier Hon Barry O Farrel. MLCs Hon Amanda Fazio, Hon Shaoquett Moslemane, Steve Mac Mahon, a former Mayor of Hurstville City Council and Labor candidate for Barton were also amongst the audience. Community representatives included Mr Samier Dandan, the president of Lebanese Muslim Association and Sr Mahbooba of Mehbooba's promise along with many others.

Sevinc Izmirli from PICAC NSW gave a presentation giving details about PICAC and various aged care services and issues. She said that PICAC (PARTNERS IN CULTURALLY APPROPRIATE CARE NSW) seeks to develop and enhance relationships and networks between CALD communities and aged care service providers to ensure that special needs of older people from diverse CALD backgrounds are identified and suitably addressed. Outcomes of the program include increased and sustained access by CALD (Culturally and Linguistically diverse) older people to aged care services that address the unique needs of each individual. The aims of SAMAA and PICAC are very similar in many ways as we understand the importance of culturally relevant services. She detailed various services including various Home Care Packages. Consumer Directed Care packages (CDC) were introduced in 4 levels of care on

the 01/08/2013 and will be replacing the current packages which will be phased out in 2015. The four levels of packages cater for different needs a formal assessment by a member of an Aged Care Assessment Team (ACAT) is required before you can get a package. It is expected that over the next 5 years there will be an increase of about 40,000 packages being offered.

She also briefed the audience about the process of building a Residential Aged Care Facility to provide culturally appropriate care to the South Asian Muslim elderly.

She concluded saying that Partnerships with other peak organisations, both Muslim specific and mainstream is vital in meeting the needs of CALD elderly people. The strength in these partnerships will assist in providing inclusiveness and transparency with services.

A senior South Asian Muslim Surgeon Dr Sikander Nasib Khan presented the case of South Asian Muslim elderly issues in detail. He spoke about community perceptions, Islamic perspective of serving the elderly and specific religious needs of Muslim elderly. He went on to explain why it was important for us to build a facility which caters for cultural and religious issues of Muslim elderly. He also touched on health care perspectives and described health issues in old age such as reduced functional reserve, reduced efficiency of regulatory systems, and increased vulnerability to stress and illness.

NSW Minister for Ageing and Disability Services Hon. John Ajaka applauded SAMAA for a very fine effort in serving the South Asian Muslim elderly. He described SAMAA's procedures and policies in line with Government guidelines. He spoke about the National Ageing and Aged Care Strategy for people from culturally and linguistically diverse backgrounds. This Strategy will help to respond to the needs of the growing number of older people from different cultures.

Mr Ajaka promised support to SAMAA which received loud applause from the audience. He invited SAMAA EXCO to meet him as early as possible to explore future growth and venues for working together.

Hon Amanada Fazio applauded SAMAA's effort and stressed that elderly care of people for CALD backgrounds be improved.

Hon Shaoquett Moselmane, the first Muslim member of NSW parliament and a longtime supporter of SAMAA, commended SAMAA EXCO efforts and applauded its volunteers for the service they have been providing to the community elderly. He promised continued support to SAMAA.

Mr Steve McMahon, ex-mayor of Hurstville and labor candidate for Barton expressed pleasure for meeting so many South Asian Muslims at the event and promised support if elected.

Mr Zahid Jamil welcomed the audience on behalf of South Asian Muslim Association of Australia. He said that SAMAA had held numerous very successful events over past few years. SAMAA had brought in aged care experts including renowned national figures who delivered fascinating talks on ageing issues. Aged care agencies gave useful presentations to SAMAA elderly not only at these events but also at numerous SAMAA workshops and seminars. He said that now was the time that SAMAA reaches out to the wider South Asian Muslim community and seek funds so that it can continue this much needed service for the ever increasing population of the elderly of the community. Not only do we need funds for the tasks we are already doing, most importantly various volunteering services, but also for much anticipated future need of building of our own aged care facility.

He expressed pleasure to see tremendous support of the south Asian Muslim community for turning up in such a large number. He said "We

were a very proud community who have been greatly contributing to this great country which we have adopted to be as our nation and home for our coming generations" Mr Jamil said that South Asian Muslims were a highly educated community and were thus better equipped to be in the fore front of taking up the challenge of aged care for the Muslim community of Sydney. Muslims are very sensitive to their religious practices and cultural traditions and it was important that we set up facilities which can cater for such sensitivities of our elderly. He emphasized that SAMAA needs support not only from the community only but also from the government. He requested political leaders on both sides to help SAMAA in achieving its objectives. He said that SAMAA has received lots of verbal and moral support from many parliamentarians including the federal minister for ageing, but indicated that SAMAA was now qualified enough to ask for material support. He said that SAMAA was willing to cooperate with other Muslim bodies in building an aged care facility.

A very successful Auction of more than 15 items generated much interest amongst the audience. These items were donated by many South Asian Muslim businesses and individuals. Raffle draw saw many winners claiming a few very interesting items.

The famous Naat singer Ms Shagufta Zia thrilled the audience with beautiful Naats. The senior singer Riyaz Shah entertained the audience with a few popular numbers while a young talent Shayan Rafique thrilled the audience with a few Bollywood songs.

The guests enjoyed sub-continental cuisine and Eid sweets and elderly received SAMAA Eid gifts.

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SCHIZOPHRENIA BY DR AHAD KHAN

'Double Personality', was how this Disorder was popularly labelled as, for a long time. It is most definitely not a Personality Disorder at all.

Occurance

Schizophrenia ranks among the top 10 causes of Disability in developed countries.

Australia has more than 40,000 people afflicted with it. About 80% of cases have a Genetic basis.

Pathology

The Disease process appears to be due to malfunctioning of Dopamine (a chemical) related Nerve Pathways in the Brain.

Clinical Features

Schizophrenia has a triad of Clinical features -
1. Positive Symptoms 2. Negative Symptoms 3. Cognitive impairment.

Positive Symptoms

- Delusions - feelings of something strange & unexplainable is happening, which others do not feel or feelings of being persecuted.
- Hallucinations - mainly Auditory (hearing voices), but can be Visual (seeing things which are not there) or with altered Taste & Smell.
- Formal Thought Disorder (loose & illogical thoughts)
- Disorganised Behaviour (bizarre mannerisms/body posturing/dress sense)

Negative Symptoms

- Affect - blunted or diminished response to external stimuli is seen.
- Avolition - lack of motivation & apathy is seen.
- Associality - withdrawal from socialisation occurs.
- Alogia - there is poverty in amount or content of speech.
- Anhedonia - lack of motivation to seek pleasure or loss of capacity to experience pleasure from usually pleasurable activities.

Cognitive Impairment

- IQ (general intelligence) is impaired.
- Selective / sustained Attention is affected.
- Working Memory is impaired.
- Verbal Memory is impaired.
- Language (verbal fluency, comprehension, naming) is impaired.
- Thought processing speed is diminished.
- Problem solving skills are impaired.
- Social Cognition (ability to identify & respond appropriately to social cues) is affected.

There is evidence, that the longer the duration of these Psychotic symptoms being untreated, the worse the clinical outcome.

Hence, an early diagnosis is important. Particularly so, because nearly 30% of Schizophrenics will attempt suicide.

Therapy

Medications are effective in controlling the symptoms. Adequate levels of Social Support, with the Family & Social Support Groups, is necessary.

Conclusion

Schizophrenia is a lifelong illness with a broad spectrum of outcomes, ranging from very poor quality of life, to very good quality of life, with an episodic course & excellent social support. The Family GP can play a pivotal role, through early detection of Psychosis, timely Specialist referral & ongoing Patient management.



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SHAOQUETT MOSELMANE DELIVERS A SPEECH ON AGED CARE in NSW Parliament

The first Muslim MLC in NSW Parliament Hon Shaoquett Moselmane gave an important speech in NSW parliament on 16 Sept in which he also highlighted issues relating to Muslim community.

Mr Mosleman said "Australia is experiencing a significant shift in its demographic profile. Decreasing birth rates and increasing life spans across mainstream communities, including culturally and linguistically diverse communities, has meant a growing ageing population. Indeed, one in four older Australians is from a culturally diverse background. The growth in our ageing population has not been met by a growth in aged care services. With an ever-increasing diversity in our older population, it is time that all governments treat our ageing multicultural population as an important public policy issue to ensure that aged care services will be culturally responsive now and in the future.

This is why there is a frantic scramble now by many of Australia's multicultural communities to build their own community-specific aged care centres to cater for the cultural needs of their communities. In fact, the Muslim community across Australia is in dire need of aged care facilities. We know that there are more than 500,000 Muslims across the nation, with a significant number in New South Wales. This is why

the Lebanese Muslim Association has had plans for some time and in fact purchased land for an aged care centre as far back as 2006. The story is repeated in many Islamic and other migrant community organisations across Western and Southern Sydney. He mentioned about \$10 million pledge from the former Labor Government, which was matched by the Liberal-Nationals Coalition to the Lebanese Muslim Association. LMA is expected to be the first within the Australian Muslim community to provide an 80- to 100-bed service for its ageing population.

Referring to SAMAA, Mr Mosleman said that South Asian Muslim Association of Australia has also been actively working on the establishment of an aged care centre to cater for its community needs and is frantically seeking government support for its delivery. He called on State and Federal governments to assist as they know fully well that the needs of the aged cannot be swept under the carpet. Many people are in need, whether they are from mainstream, multicultural or Indigenous communities, and their needs must be addressed now. Older Australians have made considerable contributions to building the economic, social and cultural prosperity that we all enjoy today. The onus is on us to acknowledge their contribution and to reciprocate by providing them with the services that they need and deserve.

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(Holy Quran 30:39)



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