

# SPRING GATHERING

April 21

# 2017

The Spring Gathering is an annual community consultation that takes place in St. James Town with the objective of gathering resident feedback around programs and service delivery. It is led by Health Access St. James Town (HASJT) in partnership with the St. James Town Service Providers Network (SJTSPN). This report summarizes the 2017 Spring Gathering thematic feedback, as well as future program planning recommendations.

## Spring Gathering 2017 Report



## Table of Contents

Acknowledgements .....	2
PART I: SPRING GATHERING OVERVIEW .....	3
Event Summary and Agenda .....	3
Consultation Methodology .....	7
PART II: KEY FINDINGS .....	8
Guiding Questions and Themes Discussed .....	8
THEME A: NEWCOMER/SETTLEMENT ISSUES .....	9
THEME B1: SENIORS' ISSUES (MIXED LANGUAGE) .....	11
THEME B2: CHINESE SENIORS' ISSUES .....	12
THEME C: MENTAL HEALTH/ ACCESS TO SERVICES .....	13
THEME D: YOUTH ISSUES .....	14
THEME E: COMMUNITY & CIVIC ENGAGEMENT .....	16
THEME F: INCOME GENERATION/SKILL- BUILDING .....	16
THEME G: SAFETY/NEIGHBOURHOOD IMPROVEMENT .....	16
Cross Cutting Themes, Discussion and Implications .....	17
PART III: APPENDICES .....	20
Appendix A: Health Access St. James Town & the St. James Town Service Providers' Network .....	20
Appendix B: St. James Town projects/initiatives referenced in this report .....	22
Appendix C: Outreach, Planning and Logistics Information .....	23
Outreach Tools, Outreach Ambassadors .....	23
Planning Committee with Service Providers .....	26
Venue, Logistics and Food Vendors .....	27
Evaluation Form .....	29
Appendix D: Small Group Discussion Guide & Worksheet .....	30
Small Group Discussions Instructions (45-50 mins total) .....	30
Worksheet Template .....	31



This report was prepared for Health Access St. James Town (HASJT) and the SJTSPN in July 2017, by the Health Promotion and Systems Specialist on the Newcomer Health Team at Sherbourne Health Centre (SHC). Special thanks to the report team:

Christina Tran, Community Dietician (SHC) | Rafiya Asad, MSW Placement Student (SHC)

Minara Begum (Hospice Toronto) [evaluation report]

Lead Author: Sehr Athar, Health Promotion and Systems Specialist, SHC

Contributing Authors: Nalini Pandalangat, Sherbourne Health Centre, Co-Chair HASJT

Ravi Subramaniam, Thorncliffe Neighbourhood Office, Co-Chair HASJT

Spring Gathering 2017 would not be possible without the dedicated efforts of all Planning Committee members; Norma Khandaker (Progress Place), Orit Adose (SJTCC), Mark Redka (HASJT), Nassim Vahidi (WHIWH), Natasha Mercy (YSM), Diana Mavunduse (Dixon Hall), Cian Knights (St. Michael's Hospital), and members of the Outreach Ambassador Committee; Niru Kumari, Bhoomi Patel, Yoga Chelladurai, Rasathy Chelladurai, Nusrat Rehman, Jane Zhou, Samiea Rashad, and Mona Abdi-Abdallah. Further details and agency participation can be found in Appendix C.

## PART I: SPRING GATHERING OVERVIEW

### Event Summary and Agenda



#### Spring Gathering 2017 Overview

Spring Gathering 2017 **was held on Friday, April 21<sup>st</sup> from 5:30 to 8:30pm** at Rose Avenue Public School, in the heart of St. James Town. This is the 4<sup>th</sup> in a series of annual community consultations carried out to understand the service and program needs of the St. James Town community. It is hosted by Health Access St. James Town and the St. James Town Service Providers Network<sup>1</sup>.

This year, a total of **224** people were in attendance, which included residents, service providers, volunteers and children. This year saw more youth participation than previous years – two St. James Town youth leadership groups came out to actively participate. There was strong representation from seniors as well, representing diverse language groups (e.g. Tamil, Mandarin). The other population group that was highly represented was that of newcomer families. Six community ambassadors took a leadership role in the planning, outreach and in the table facilitation.

There was a general buzz of excitement throughout the entire event, with participants arriving on time and staying until the end. Overall feedback indicated that the event was very well-organized. The date (a Friday evening) and time (5:30PM) chosen this year ensured that most residents were able to attend and stay until the end, without the constraints of school or work the following day. The event agenda began with service provider presentations, and then moved into a small group priority and action-setting exercise exploring 7 pre-determined themes. The night ended with a light dinner and raffle prizes.

---

<sup>1</sup> Refer to Appendix A for an overview of Health Access St. James Town and the Service Providers Network

*The following report includes highlights of the event planning and execution, including lessons learned. It also outlines the methodology and key findings, with supporting evidence.*

---

## **Planning**

A planning committee was struck for planning the event. This committee worked out a draft agenda, which was then vetted by a subgroup of members of the Health Access St. James Town Executive Table. All details of event membership, event planning, vendors contracted, outreach and research methods used, as well as lessons learned regarding the planning process, can be found as part of Appendix C.

## **Community Ambassadors and Outreach**

This year's outreach process was co-led by community outreach ambassadors. As part of the outreach package, a two-page information sheet on what residents could expect to hear during Spring Gathering was written up and translated into 4 priority languages: Tamil, Arabic, Mandarin (Simplified Chinese), and Hindi. In addition, a flyer was created and translated into Tamil, Arabic, Bengali, Cantonese and Mandarin. See Appendix C for copies of the flyer and the information sheets.

To engage with residents, outreach ambassadors used the aforementioned info-sheets in their table outreach in buildings across St. James Town. The outreach ambassadors represented the cultural diversity of St. James Town and spoke various languages. Many of them have been involved in the planning and engagement of outreach activities for Spring Gathering since the inaugural event in 2014. Their knowledge and understanding of the community helped to inform both the outreach and planning of the event.

## **Formal Agenda**

The event began with presentations from members of the St. James Town Service Provider Network (SJTSPN), outlining highlights of what they have done over the past year. In addition to the SJTSPN, the Seniors Sub-Committee, Youth Network, and Health Access St. James Town all made presentations. Some clients also shared their experience with using the services or being part of a sub-committee. Special projects were also showcased, including The St. James Town Safety Initiative, The St. James Town Youth Mental Health, Substance Use and Tobacco Prevention Project<sup>2</sup> presented by the St. James Town Youth Council, and City Planning department's St. James Town Community Improvement Plan. See Table 1 for a detailed breakdown of the facilitators' agenda.

---

<sup>2</sup> Please Refer to Appendix B for more information on these three initiatives in St. James Town

Table 1

<b>SPRING GATHERING FACILITATOR AGENDA</b>	
<b>4:00PM</b>	<b>SET-UP ROOM</b> (Audio-visual, Table Arrangements, Displays) <i>Childminding, Signage, Kids Room for Art-Making</i>
<b>5:30PM</b>	<ul style="list-style-type: none"> <li>• <b>Registration &amp; Snack Bag</b> <i>Snack Bag with cutlery, snacks, raffle ticket stapled on to bags Meal tickets also given(vegetarian vs. meat). Yellow dots for people who do not want their photos taken</i></li> <li>• <b>Table / Theme Assignment</b> <i>Ask people to self-select which topic is of most importance to them today to direct them to groups (Everyone help with flow)</i></li> <li>• <b>Music playing while people settle &amp; register-</b> Rick</li> <li>• <b>Slide Show of Photographs of Previous Spring Gatherings</b></li> <li>• <b>When people arrive at their tables, fill out the Priority-Setting Worksheet</b></li> </ul>
<b>6:00PM – 6:35</b>	<b>FORMAL PRESENTATIONS (Service Provider Updates)</b> <ol style="list-style-type: none"> <li>1) <u>Welcome, Housekeeping SG introduction- 5 mins</u></li> <li>2) <u>SPN Highlights of 2016, &amp; SPN 2017 Work-plan</u></li> <li>3) <u>Health Access Report Back – 5 mins</u></li> <li>4) <u>Seniors Sub-committee highlights (3-5 mins)</u></li> <li>5) <u>Youth Network / SJT Youth Council Report Back- 5 mins</u> <ul style="list-style-type: none"> <li>- Youth Network member to give 1-2 mins highlight followed by Special Presentation by SJT Youth Council</li> </ul> </li> <li>6) <u>SJT Safety Initiative &amp; St. James Town Community Improvement Plan Updates- 5 mins</u></li> </ol>
<b>6:35 PM</b>  <b>(50 mins)</b>	<b>SMALL GROUP DISCUSSIONS- SEE FACILITATION GUIDE</b>  <b><i>THEMES: Seniors, Youth, Mental Health &amp; Wellbeing- access to services, Income Generation &amp; Skill-Building, Safety &amp; Neighbourhood Improvement, Community Connections/ Civic Engagement, Newcomer/Settlement</i></b>
<b>7:25</b>	<b>MEAL SERVICE</b> <ul style="list-style-type: none"> <li>• <b>Serve wraps to tables</b></li> <li>• <b>Wrap up small group discussions &amp; begin report back</b></li> <li>• <b>Cue evaluation</b></li> </ul>
<b>7:25</b>	<b>REPORT BACK (1-2 highlights per group)</b> <i>1 Person reports back from each table</i>
<b>7:50</b>	<b>EVALUATION</b>
<b>8:00</b>	<b>RAFFLE &amp; PRIZES</b>
<b>8:15</b>	<b>END</b>
<b>8:30-9PM</b>	<b>TAKE DOWN</b>



## Evaluation Activities

In total, 113 evaluation forms<sup>3</sup> were filled out this year. It was helpful to have the table facilitators distribute and pick up the evaluation forms; this ensured that participants filled them out. All evaluation feedback is incorporated throughout this report, with overall satisfaction detailed in Table 2.

Table 2

Overall Participant Satisfaction at Spring Gathering 2017:			
Overall, 72% of participants indicated that they were very satisfied (“a lot”) with the event overall	59% said that they found out information about new initiatives in the community. 29% said they found “some” new information.	69% of participants strongly agreed that the quality of the facilities (rooms, communication aids, etc.) provided at the event was appropriate.	65% strongly agreed that the group discussion was effective in terms of the issues/topics that were discussed.

## Recommendations and Lessons Learned:

- Reduce the time spent on service provider updates and formal presentations and include more time for engagement. This was echoed in the planning committee debrief and came through from the participant evaluations (e.g. “less presentations” and “more time to talk to each other”);
- In addition to being a consultation, this event is also an opportunity to celebrate the community, so consider adding a few more fun activities next year like the raffle and prizes. This could include, as suggested by participants, “more music”, and “more fun and more gifts”. It could also include creating a high energy activity where all get involved;
- Consider community-led presentations;
- While a Mandarin-speaking interpreter was available for one of the seniors’ groups (which had about 30 seniors present), and Tamil-speaking facilitators were present at other tables, evaluation feedback indicated that there were still language barriers and requests for interpreters in additional languages;
- Participants expressed an interest in more discussion on mental health and health care topics in the evaluation;
- Participants also expressed that additional stakeholders be part of the consultation (e.g. the police department to engage in discussions on safety, and the TDSB)

---

<sup>3</sup> Refer to Appendix B for evaluation form

## Consultation Methodology

This year the small group discussions were thematically organized in order for residents to come up with detailed, priority actions within each thematic area. The methodology was informed by the Toronto Poverty Reduction Strategy [community conversations phase](#). At each table there were two ways to contribute to the discussion: 1) small group facilitated discussions with flip chart paper for capturing notes and 2) individual priority-setting worksheets so that participants were able to prioritize their actions in written format. Worksheets were translated and made available in 3 languages: Tamil, Arabic and Mandarin.

The following 7 themes were chosen for small group discussions, based on emerging themes from prior Spring Gatherings and Festival Survey Feedback: (1) Newcomer/ Settlement Issues, (2) Mental Health- Access to Services, (3) Seniors' Issues, (4) Youth Issues, (5) Income Generation & Skill-Building, (6) Safety/ Neighbourhood Improvement, and (7) Community & Civic Engagement. Service Providers and Ambassadors received training and orientation to the methodology and table facilitation at Sherbourne Health Centre on April 11th, 2017. At the orientation, 15 people (service providers and ambassadors) were in attendance.



At the event itself, there were 12 group discussion tables based on the 7 thematic areas, all varying in size. For example, both the “Seniors’ Issues” and “Newcomer/Settlement Issues” themes had two large group discussions. Each small group discussion began with a presentation by table facilitators on what had been accomplished over the past year, following by some guiding questions. The guiding questions during table discussions and on individual worksheets were: *“What are the 3 most important actions we can take as a community with regards to this theme?”* These actions could include continuing what is already being done, or developing something new. Refer to Appendix C for small group discussion instructions and the priority-setting worksheet.

By the end of the night, a total of 61 individual worksheets were completed by participants at the event. The data collected in the worksheets was coded to identify emerging priorities within each theme. These new priority sub-themes were tallied in order to identify the top priorities per theme. Small group discussion notes (flip chart paper) supplemented the data collected from the worksheets.

## Recommendations and Lessons Learned:

- Participants were invited to choose which theme they wanted to contribute to as they entered the gym. However, many participants saw the themes as “population-based” themes and not “issue-specific” themes, meaning that fewer participants gravitated towards thematic tables such as “Safety” and “Mental Health”, and instead gravitated towards the population with which they identified (i.e. seniors, youth, newcomers). As a result, the Seniors’ Issues tables and Newcomers’ Issues tables were highly attended



but other tables such as the “Safety” and “Mental Health” themed table did not have as many participants. Thus, it would be useful to consider renaming the themes in the future (e.g. using “Settlement” instead of “Newcomers’ Issues”);

- A limitation of the methodology this year is that it did not allow for a comparison with the results of prior consultations as the question format had changed;
- The methodology enabled residents to brainstorm actionable strategies to address priorities;
- Other creative ways to facilitate small group discussions should also be considered in order to make them more interactive in future years, especially for garnering feedback (e.g. flip chart paper, post-it/sticky notes, etc.)
- Training should be expanded for all table facilitators to include more information about facilitation skills and redirecting difficult conversations;
- It was generally agreed upon by the planning committee that both worksheets *and* small group discussion (flip chart paper) were equally meaningful ways of engaging participants. It was recommended to keep both tools as part of the consultation in future years.

## PART II: KEY FINDINGS

### Guiding Questions and Themes Discussed

**What are the 3 most important actions we can take as a community with regards to this theme?**

- A) *Newcomer/ Settlement Issues,*
- B) *Mental Health-Access to Services,*
- C) *Seniors’ Issues,*
- D) *Youth Issues/Concerns,*
- E) *Income Generation/ Skill-Building*
- F) *Safety/ Neighbourhood Improvement,*
- G) *Community & Civic Engagement*



The above themes are areas of concern to the community that have already been well-documented. Strategies are currently being explored, developed or implemented by service providers in order to address them. This year’s methodology enabled residents and service providers to explore strategies and concrete actions in more detail, as per the above themes.

The following is a summary of the theme-based small group discussions, as well as the priority-setting worksheets that were filled out by individuals. Wherever possible, direct quotes from participants are included to provide further evidence and clarification on the key findings.

## THEME A: NEWCOMER/SETTLEMENT ISSUES

(Source - 24 worksheets and table discussion)

The top 5 priorities for participants contributing to the newcomer/settlement theme were: 1) increasing employment opportunities for newcomers, 2) engaging newcomers and sharing information with them, 3) increasing language classes for newcomers in the community, 4) engaging newcomer women both personally and professionally, 5) kids' classes and local activities and 6) counselling.

1. **“Increase the employment opportunity”/ Developing employment-related supports for newcomers**, especially for *newcomer women*, was the top priority for the newcomer/settlement issues theme. It was expressed that newcomers are struggling to get jobs in Canada, whether they are within their field or for part-time survival. Suggestions to address this gap included:
  - Having more raining and educational upgrade programs
  - Developing a Professional network for newcomers
  - Technical classes for newcomer women
  - Increasing employment opportunities through partnerships with different employers to provide training and skills-building opportunities to newcomers
  - Providing access to part-time job opportunities
2. **Newcomer Engagement and Information-sharing**- The second priority was the need for better awareness of *local* services, programs, government resources and policies for newcomers and their families, in particular for isolated newcomers. Within this priority, it was expressed that there should be creative ways to engage newcomers and share information.

*“More community engagement for the newcomers like “Welcome Kit” with all of the info about organizations working in this area so newcomers will come to know where to go for a particular service.”*

The St. James Town Community Corner (The Corner) was also mentioned as a space that newcomers access, and should be developed as a focal point for sharing information on all services relevant to newcomer populations available in the neighbourhood.

Outside of the box engagement strategies included:

- Developing an “Information Providers Group” to provide information to newcomers
- Implementing group tours of Toronto and/or the neighbourhood
- Holding on-going information sessions for newcomers

*“Some more cultural celebrations like Eid, Diwali, Christmas or any other cultural day. Why: It will help the newcomers to go and explore the community in their*

*own comfortable way. Or they will start to come out then they will be more willing to come and mix with the whole community.”*

3. **“Eliminate the language barrier”-** The third priority for the newcomers/settlement theme was to increase the number of language classes within the community. This referred to both English and French language classes as well as general workplace communication classes to learn about Canadian workplace culture.

*“French classes (CINC) should start to provide for classes to beginners as well. Some jobs require knowing French but if they are beginners can’t pay to learn the language, intermediate level classes being free doesn’t make sense.”*

4. **“More training classes for women!”/ Women’s Personal & Professional Engagement-** Within the newcomer/settlement theme, engaging newcomer women through social/recreational and skill-building activities was also deemed an important priority. There was an expressed desire for:
- Recreational activities like fitness, dance activities
  - Fun, entertaining activities
  - Computer and technical classes

The suggestions around social/recreational/entertainment activities in the evening were focused around women who may be homemakers and spend a great deal of time supporting household, homecare and childcare work.

*“There should be more training classes for women as related to dance, fitness, etc.....Why: as women are less aware for their self care on fitness especially the mothers as their whole day spend in homecare and with their children.”*

*“Some fun and entertainment activities games for women would also be started in evening and in winter also. Why: women will get refresh and they can leave their kids at home and will get some quality time.”*

5. **Kids’ engagement; from indoor/winter activities to mentally engaging classes for young kids-** Newcomer families also expressed suggestions to engage children in St. James Town. Specifically they mentioned:

- Kids’ indoor playground & activities

*“Indoor Play Areas which must be accessible 24/7 for the public. Because in winter, is tough for kids to be at home all the time.”*

- Kids’ classes



*“Classes for kids (music, swimming, abacus). Why: it will enhance mental abilities and physical abilities as well, Abacus is very effective for kid's mental development.”*

*“There should be more pre-school classes for the kids who are going to school upon 4 years.”*

6. **Counselling for newcomers**- in the newcomer-themed small group discussions, “psychological assistance” and “counselling for homesickness and depression” were identified as priorities.

## **THEME B1: SENIORS' ISSUES (MIXED LANGUAGE)**

(Source: 8 worksheets and table discussion)

There were two seniors' theme-focused tables at the Spring Gathering this year. One of the tables was facilitated in Mandarin. The other tables were mixed language groups, where the discussions were facilitated in English and Tamil. The priorities reflected below are those of the mixed language seniors' groups. They identified two priorities, 1) addressing seniors isolation 2) and addressing health and safety, and came up with concrete actions to address each one.

### **1. Social isolation (being connected and having information)**

#### **1a) Information sharing:**

- “Seniors card to give out to the members in the community to invite them to the senior's program (like a business card)”
- “Seniors “handbook” to have clinics location and hours, help lines, etc.”
- “Van Transportation for seniors to be transported to doctor's appts or needed healthcare appts to & from residence”

#### **1b) Feeling engaged and connected:**

- Seniors Buddy-system for shopping and errands
- Intergenerational programs, youth can learn from seniors
- “Socials in the buildings to get more seniors involved. Would be nice if there was a room on every floor. Maybe Party Rooms in the buildings?”
- “Day Trips!”
- “Program like Creating Caring Communities for isolated seniors. Including Visits when people are sick.”

#### **1c) Continuing social/recreational programs as a response to social isolation:**

There was a general consensus that there were a good number of social/recreational opportunities within the community, in particular at The Corner. Individuals expressed a desire to continue:

*“Continuing [programs at] The Corner. Why: Reaching seniors; Intergeneration; Socially help stay well-connected.”*

*“Continue recreational programs for seniors. Attend line dancing, see movies (Fox Theatre), make arts and craft (necklace, bracelet, etc), play bingo, scrabble.”*

They wanted to add the following activities to the recreational programs available for seniors:

- Monthly kitchen, cooking
- Music & pet therapy
- More seniors’ crafts (in the Mental Health Day program at The Corner)

2. **Safety and Health** - The individual worksheets highlighted that safety was of priority concern to seniors, and this impacted their sense of well-being. This included neighbourhood and building safety. Specific actions that were mentioned to address safety and health included:

- Seniors’ buddy system for safety when going out in the community on errands etc.
- Building safety:  
*“Keep an eye on the floors at 200 Wellesley St., it's not a [joke]. Please look into it, there is all ways somebody, walking around scare people, I saw no security.”*
- Transportation for seniors
- Specialized services for seniors such as: seniors’ dental Program (“Not just cleaning, but need dentures realigned, etc.”) and seniors’ hearing clinics.
- Building seniors’ leadership capacity:  
*“Bringing all the different leaders from seniors cultural groups together. Why: To learn about and share our culture while building stronger community.”*

## **THEME B2: CHINESE SENIORS’ ISSUES**

(Source: 16 worksheets and table discussion notes)

The top priorities for the Chinese seniors, both Mandarin and Cantonese-speaking, included 1) more health-focused service and, 2) safety (enforcement and activities) and 3) social/recreational activities.

1. **Health:**

- More physical fitness and exercise programs,
- mental health counselling/ more awareness about and information regarding mental health
- Health literacy seminars/ workshops on different topics
- Interpretation to support all of the above activities

2. **Safety:** “increase the enforcement on the community's security”, and have safety activities.

3. **Social/recreational Activities:**

- Senior's entertainment
- Physical exercise
- Singing
- Dancing



## **THEME C: MENTAL HEALTH/ ACCESS TO SERVICES**

(Source: 6 worksheets and table discussion notes)

Within the mental health theme, the top priorities included: 1) raising awareness about mental health through creative educational means, 2) improvements to current mental health services being offered in St. James Town, and 3) more programs to address stress and emotional well-being.

1. **Raise awareness about mental health within the community-** Residents expressed that a lack of awareness and lack of knowledge about mental health can exacerbate fear, stigma and neglect. Solutions to raise awareness about mental health included:

- Mental health screening projects;
- Posters about education as well as flyers/informational pamphlets describing illnesses, signs and symptoms so community members are more aware on a personal level and can understand their community better;
- More workshops about mental health, inviting speakers to talk about mental health and spread awareness about the issue in the community

2. **Improvements to mental health services-** There was also specific feedback around service provision around mental health. Examples included:

- More Mental Health Counsellors;
- More case management supports, specifically, there was an ask for “regular follow up with those enrolled in programs to ensure proper care is provided and monitored until closure of case file;”



- Educating residents about client confidentiality and privacy. Residents seemed under the impression that the privacy of client information is not kept confidential, which acted as a deterrent to clients seeking service;
  - Reducing service provider/ systemic bias and prejudice. Residents also spoke about occasional service provider/systemic bias and prejudice, expressing that there were “complaints from service seekers who felt being left out.”
3. **Programs to address stress and emotional well-being-** Finally, *yoga and meditation* were highlighted as programs to address stress, and “slow down the ageing process, “keep people healthy”.

## THEME D: YOUTH ISSUES

(Source: 10 worksheets and table discussion notes)

The top priorities for youth in St. James Town, in order, included 1) feeling safe as a community and as young people in the community 2) youth mental health, 3) community revitalization 4) recreational space and programming and 5) youth employment.

1. **“Keeping our community safe and secure”** - Safety included a sense of “feeling safe” in one’s community, as well as feeling safe as an individual.

*“Safety and Security. Why: Our Community is not safe. People get robbed in streets and that can't be tolerated.”*

*“Peace keeping- the community should be peaceful. I feel our society is not peace.”*

In addition, during the group discussion, youth indicated that robberies, fights, bullying and fear of sexual harassment were all safety concerns for youth that needed to be addressed. The solution they came up with was:

- More youth programs such as *education programs to address bullying and fear of sexual harassment and self-defense classes*
- Safety patrollers

2. **Youth Mental Health** - This included:

- Religious/ prayer space
- Mental health programs for youth/ programs to address the mind

*“An example would be playing Sudoku, crosswords and word searches. Why: it helps build the mind. Keeps youth calm and relaxed from dealing with depression, mental health or if there are any physical breakdowns.”*

3. **Improve Neighbourhood Infrastructure-** Amongst youth, there was a sense of pride and ownership over the community which came up through strategies to revitalize, improve or clean the physical infrastructure of the space.

*“To clean the environment surrounding the community. Eco-friendly which is the youth working together to accomplish multi-beneficial. Why: When a community is clean, it means it's healthy. It makes people feel comfortable. It is also a way to help build team work.”*

*“More trees, benches, bike lanes, fix sidewalks and plants. Why: things look like they are breaking down.”*

4. **Recreational programing-** The importance of recreational space was highlighted so that “youth can gather as it makes things easier and gives them a place to do things in their free time.” There were also specific recreational opportunities and activities that were brought up, such as a basketball court and soccer field (“like Regent Park”).

*“Make the 650 Parliament St. broken down tennis court a basketball court. Why: more people will come outside and enjoy playing sports.”*

*“Make a better soccer field. This is important because Rose Ave. is too small and there are a lot of people that play soccer.”*

5. **Employment** -The 5<sup>th</sup> priority for youth in St. James Town was youth employment.

*“To create more opportunities in terms of jobs. Why: Because youth could use some help getting jobs or at least have assistance with getting opportunities for jobs. It is a useful thing to learn and would be beneficial to youth.”*

**Finally, youth brainstormed how to get youth more involved in programs and came up with this list:**

Interesting ads  
Volunteer hours  
Field trips

Diverse program opportunities  
Interesting guest speakers  
Free food

Prizes

## **THEME E: COMMUNITY & CIVIC ENGAGEMENT**

(Source: 3 worksheets and table discussion notes)

This was a small group, with only 3 individual worksheets filled out. However, the feedback below was also obtained from the small group discussions. This feedback included:

1. **Know your political candidates & neighbours-**

*“Candidate- mandate- impact residents. Know your surroundings. Know your neighbours. We need to know who to vote for. Neighbours create a sense of security.”*

Residents wanted to know what level of government was responsible for which service. There was feedback that residents should be more involved in what is happening in their community.

2. **Service gaps & access-** This group also articulated gaps in services such as dental care, eye care and transportation to services (eg. Wheel-Trans), legal services, hair cutting, pet care). Additional services the group brainstormed included: clothing banks, community markets, therapeutic community walks, skill-building using technology, and events to celebrate the LGBTQ community<sup>4</sup>.

## **THEME F: INCOME GENERATION/SKILL- BUILDING**

(source: 7 worksheets and table discussion notes)

This group was primarily made up of residents who were interested in starting or developing their skills further in the areas of small business development. The main priorities that surfaced from priorities set by individuals in this group and small group discussion included:

1. **Small Business Planning, funding and support** – coaching support, understanding licensing, and understanding how to plan for small business ventures
2. **Financial literacy** - including understanding investments, planning for retirement and small business planning
3. **Neighbourhood level asset-mapping-** discovering the assets (or skills) of residents will determine small business opportunities within the neighbourhood

## **THEME G: SAFETY/NEIGHBOURHOOD IMPROVEMENT**

(Source: 5 worksheets and table discussion notes)

The top priorities that were most relevant to the theme of safety/ neighbourhood improvement:

1. **Cooperation/Support of safety initiatives in St. James Town-** having the community work more closely together towards safety and security in the neighbourhood.
2. **Neighbourhood Improvements-** lighting, speed control, road repairs on Ontario St.

---

<sup>4</sup> It should also be noted that evaluation feedback from the event indicated that community wanted to see more representation from indigenous communities at social gatherings and consultations like Spring Gathering.

## **Cross Cutting Themes, Discussion and Implications**

There were a number of cross-cutting themes and priorities that came up across the small group discussion tables. In addition, many of the priorities mentioned were areas that service providers in St. James Town are already working on and residents expressed that they should continue these programs.

### **Mental Health**

It could be argued that mental health awareness has increased in the community over the last few years, indicated by the number of times and the different ways in which mental health priorities were identified across the small group discussions. This is despite the fact that the mental health themed topic table was not widely attended by participants. The Mandarin-speaking seniors' group spoke about the need to continue and have more mental health counselling services available. Youth also identified addressing youth mental health as a priority action. In addition, the mixed language seniors' group specifically spoke solutions to address seniors' social isolation in St. James Town. While the data from the newcomer/settlement-themed worksheets did not prioritize mental health, the small group discussion notes indicated that counselling for depression and psychological assistance for newcomers was important. In addition, the newcomer group did identify the systemic barriers newcomers face (i.e. employment barriers) and the need to engage newcomer women who may be socially isolated, identifying determinants of newcomer mental health and well-being.

There is a lot of opportunity to build on the momentum of and reduce stigma related to mental health and illness within the community. Additionally, there is an opportunity for mental health-focused service providers to educate clients and residents on the boundaries of a mental health support role, given some of the perceived concerns around privacy and confidentiality.

### **Information Sharing/ Reducing Isolation**

Many of the priority action areas identified within the newcomer/ settlement theme are initiatives that service providers are already addressing in some capacity and can build upon. For example, newcomers highlighted that there is a need to prioritize information sharing with newcomers and engaging newcomers in the community (e.g. through field trips, cultural celebrations). These are already actions that service providers are taking within the community. Thus, by leveraging current partnerships, networks and community spaces, service providers can increase the frequency of such community events, provide more information sessions/workshops for newcomers and increase outreach efforts to ensure newcomers are aware of the availability of existing services.

The seniors' group also discussed information sharing, and came up with feasible, creative strategies for getting information out to isolated seniors, such as a senior's card and a senior's handbook (with all the essential service contact information and a calendar of events). They also identified that social events and intergenerational programs will make seniors feel more connected with and within their communities. There is an opportunity for the SPN youth network to connect with the SPN seniors' subcommittee to develop some intergenerational

programming. It is also worth noting that programs like Creating Caring Communities were highlighted as exemplary models in reaching isolated seniors in their homes.

## **Employment**

While barriers to employment occur on a systemic level and are all too well-documented, the newcomer/settlement table offered concrete solutions that create pathways to employment. These included establishing a network for newcomer professionals, technical skills-training opportunities, financial literacy education and increasing the frequency and awareness of language classes in English and French (which ultimately increase employability). Youth also identified access to employment as a priority.

## **Safety/Neighbourhood Improvement**

Safety/ Neighbourhood Improvement were identified as a priority for both seniors and youth in St. James Town. These themes have been mentioned in prior Spring Gathering feedback as well. Despite efforts to address safety concerns of residents, there is still a pervasive feeling of being unsafe in the neighbourhood and within the buildings, with calls to action around safety enforcement in buildings (i.e. security guards, cameras, and lighting), as well as creative solutions to address individual safety like buddy-systems for seniors. Youth specifically mentioned that improving the neighbourhood infrastructure was a priority, which is also a theme that has come up every year. The findings around safety from this Spring Gathering report should be reviewed alongside the Safety Initiative findings, as the project is in the process of developing stakeholder capacity to respond to some of these on-going issues.

## **Social Recreation Programs**

From a health and well-being perspective, social/recreational programs seem to have greatly benefited residents in St. James Town, as it was expressed numerous times and with multiple examples that such programs should continue, in particular those offered through The Corner to seniors. In addition, recreational programs that focus on sports and fitness were identified as priorities for seniors, newcomer women, *and* youth. The newcomer/settlement table expressed increased social/recreational activities for young children all year round.

## **Service Gaps**

Remaining gaps in service provision that have been echoed over the years that were identified again in this year's Spring Gathering include eye/vision care, dental care/aid, hearing clinics/supports, and legal aid. In addition, pet care and interpretation services were requested. As well, transportation to and from healthcare appointments was also mentioned. It should be noted that alongside events to celebrate equity-seeking groups like LGBTQ community, events to celebrate indigenous communities and/or have indigenous representation at community events, celebrations and gathering can also be seen as an indication of a programming/ service gap.

## **Community Leadership**

Community members expressed interest in taking on leadership roles to address issues and priority concerns. For example, the seniors' group articulated a strategy to bring all the senior leaders together from different language groups to tackle seniors' concerns, which is something that is currently under way in St. James Town. The community engagement table focused their discussion on civic education for residents as a precursor neighbourhood change. In the evaluation feedback from Spring Gathering 2017, one resident mentioned developing a leadership forum where community members could actually turn some of these ideas into action. Where residents did not explicitly mention leadership, the solutions they suggested could easily be resident-led. For example, the newcomer professional's network could be taken up by newcomer residents if supported by community partners collectively. Similarly, with the appropriate knowledge, training and resources, residents could actually pilot some income-generating initiatives within the community. The sub-committees of the Service Providers' Network could integrate some of these priorities into their annual work-plans.



## PART III: APPENDICES

### Appendix A: Health Access St. James Town & the St. James Town Service Providers' Network

#### HEALTH ACCESS ST. JAMES TOWN (HASJT): OVERVIEW

*Health Access St. James Town (HASJT)* is a *Toronto Central Local Health Integration Network (LHIN)* initiative. It began in response to the crisis that followed a major fire at 200 Wellesley Street in 2010, which revealed that many high need residents were not connected to services in meaningful ways - which negatively impacted their access to coordinated care when it was most needed. Sherbourne Health Centre leads the initiative in partnership with 16 other service organizations that form the Health Access Executive Table.

#### HASJT Partner Organizations (2017)

HASJT is a partnership of 16+ organizations who work to streamline access to services and supports through various initiatives. HASJT envisions a collaborative, better coordinated model of care in order to address the needs of St. James Town residents. Promoting the use of a standardized Intake and Assessment Referral Form among local agencies is one such initiative, intended to improve clients' access to various services - as well as outcomes.

- Anishnawbe Health Toronto
- Central Neighbourhood House
- Dixon Hall Neighbourhood Services
- Fred Victor
- Hincks Dellcrest
- Hospice Toronto
- Progress Place
- Sherbourne Health Centre (Lead)
- St. James Town Community Corner (Primary intake and service hub)

- St. Michael's Hospital
- Thorncliffe Neighborhood Office
- Toronto Community Care Access Centre (CCAC)
- Toronto Community Housing Corporation
- Toronto Public Health
- Women's Health in Women's Hands CHC
- Young Street Mission
- Youthdale

#### Intake Workers:

Through the HASJT initiative, 3 Intake and Community Engagement Workers were hired to facilitate community members' access to available services and supports. The Intake Workers connect with point-persons at the various agencies in order to strengthen connections and facilitate access. Intake workers also accompany organization staff on home visits to make connections to home-bound/marginalized clients.

For more information, please visit: <http://www.stjamestown.org/health-access/>.

## **ST. JAMES TOWN SERVICE PROVIDERS' NETWORK**

The St. James Town Service Providers' Network (SJTSPN) consists of service providers and community members who work collaboratively to support the St. James Town community. The Network leads the development and implementation of a coordinated plan for a vibrant, safe and healthy community.

### **Objectives**

- Identify the needs, assets, resources and gaps in the St. James Town Community.
- Collaborate and coordinate with organizations to address the identified needs.
- Advocate for policy and system changes to address priority issues.
- Interact with organizations, community groups and decision makers working in St. James Town.
- Evaluate the impact and effectiveness of the activities of the SPN.

### **Membership**

Members of the SJTSPN represent various agencies providing services to the St James Town Community. SJTSPN members follow the SJTSPN Terms of Reference and have signed a Participation Agreement.

### **How We Got Here**

The St. James Town Service Providers' Network was formed in response to requests from community groups to address coordination and service planning in St. James Town. It began in 1998 as a coalition under the name St. James Town Working Group (SJTWG). By mid-2006, the coalition was represented by over 20 social, health and educational organizations. In the fall of 2008, the group was renamed the St. James Town Service Providers' Network, developing Terms of Reference that reflected their mission, goals and objectives.

**WWW.STJAMESTOWN.ORG**

@sjtccorner

www.facebook.com/sjtccorner

**Contact:** SJTSPN@STJAMESTOWN.ORG

**Or Call:** 416-964-6657 x238

## Appendix B: St. James Town projects/initiatives referenced in this report

### ST. JAMES TOWN COMMUNITY SAFETY INITIATIVE

The St. James Town Community Safety Initiative was conceived as a three-phase project with the aim of improving the safety of St. James Town (SJT) by addressing the concerns of residents in a collaborative manner. This program partners with the City of Toronto (funder), the SJT Community Corner, the SJT Service Provider Network, Toronto Police Services, Toronto Community Housing, Toronto Fire, METRAC and the residents of St. James Town.

The first and second phase of this project included resident engagement and data collection, while the third phase is focusing on resident mobilization in the creation of a permanent, resident led Safety Committee and Community Response team. The most vital aspect of the SJT Safety Initiative has been the work of the Safety Ambassadors. These local residents have been the face of the project and have acted as liaisons between other residents and service partners. The resident safety committee, which has already begun its work, will be comprised of volunteers made up of residents from each of the 19 high-rise buildings to ensure diversity and equal representation. The Safety Response Committee will build on what has been set in motion throughout these past two years of work, and will be responsible for all ongoing community safety initiatives in the future, with the vision of creating a safer more vibrant community. For more information, please visit: [www.stjamestown.org](http://www.stjamestown.org).

### ST. JAMES TOWN YOUTH COUNCIL- YOUTH MENTAL HEALTH AND TOBACCO USE PREVENTION PROJECT

The St. James Town Youth Council, in partnership with Toronto Public Health and Sherbourne Health Centre, received funding from the City of Toronto's *Investment in Youth Engagement* grant. This project focuses on youth mental health and the prevalence of smoking among youth living in St. James Town. Through this project youth in St. James Town build their capacity to understand youth mental health and substance use as well as the harmful health effects of tobacco smoke (through shisha smoking). They received training from Sherbourne Health Centre's Newcomer Health Team, Turning Point Youth Services and The Yonge Street Mission. The training includes the topics like substance use and addictions, where to get support, how youth can speak this issue to others. A core project team is created from the Youth Council consist of 6 Youth Ambassadors. Ambassadors then go out in to the community to do speaking engagements (speak with other youth) on what they have learned through the project. For more information, please visit this link: <http://stjamestownyouth.com/youth-mental-health-project-2017/>.

### ST. JAMES TOWN COMMUNITY IMPROVEMENT PLAN

For recent development applications, reports and updates (2015) from the Community Planning department at the City, for St. James Town, see this link: <https://www1.toronto.ca/City%20Of%20Toronto/City%20Planning/Community%20Planning/Files/pdf/S/St.%20James%20Town%20CIP%20October%20Presentation.pdf>

## Appendix C: Outreach, Planning and Logistics Information

### Outreach Tools, Outreach Ambassadors

- Rasathy Chelladurai- Tamil, English
- Yogarajah Chelladurai- Tamil, English
- Niru Kumari- Hindi, English,
- Bhoomi Patel- Marathi, Hindi, Gujarati, English
- Nusrat Rehman- Hindi, English
- Jane Zhou- Mandarin, Cantonese, English
- Samiea Rashad- Urdu, Punjabi, English
- Mona Abdi-Abdallah– Arabic, English

**Health Access St. James Town and the St. James Town Service Providers' Network Present:**

# **SPRING GATHERING**

**April 21st, 2017 5:30pm - 8:30pm**  
**Rose Ave. Public School Gym at**  
**675 Ontario Street**

Light Dinner Provided & Childminding Available

***RAFFLE & PRIZES!***



 **Register by emailing**  
**register@stjamestown.org**  
**or call Sehr at 416.324.4100, Ext**  
**5259**  
**or drop by The Corner at 200**  
**Wellesley Street East**

 **St. James Town**  
**Community Corner**

Figure 1 FLYER FOR SPRING GATHERING

**You're invited to the annual Spring Gathering-**  
**Friday, April 21<sup>st</sup>, 5:30-8:30 PM**  
**at Rose Avenue Public School GYM (675 Ontario Street)**

***Hosted by Health Access St. James Town and The St. James Town Service Providers Network***




***What is the Spring Gathering?***

*The Spring Gathering is an annual community consultation with residents in St. James Town, hosted by a group of residents and service providers. It is an opportunity for residents to provide feedback on programs, services and activities that impact residents in St. James Town. It is a chance to have your say in how to improve your community!*

***What will happen?***

*For the first part of the event, service providers and residents will be able to share some highlights of things we have accomplished in the past year, that have positively impacted the community. In the second half, we will break out into small groups to discuss further what we can do to address issues, improve the neighbourhood and enhance access to services.*

***Below are some of the topics and themes we will be discussing in this year's Spring Gathering.***

-  ***Health and Social Services*** – Did you know that through Health Access St. James Town (HASJT), in 2016 alone, we connected 1938 clients in St. James Town to health and social services? HASJT is a coordinated intake and referral service that runs out of The Corner at 200 Wellesley Street. It is made up of 15 partner agencies that all work together to coordinate care and services for residents in St. James Town. Examples of services we connect residents to include doctors, diabetes clinics, settlement workers, housing services and counseling supports. Many of these services are located under one roof in the heart of St. James Town! HASJT also responds to critical incidents in St. James Town with grief counseling and outreach supports. Come hear more about how we connect clients in need to care and supports!
  
-  ***Civic Engagement in St. James Town***- Community members of St. James Town have grown in their understanding of government and civic engagement and, most importantly - have had fun while doing it! During our past 2015/2016 federal election, residents participated in fun Democracy Talks, Pop-Up Voting Stations, and community wide Federal Election Mock Debate with MP Bill Morneau, Linda McQuaig, Green Party and Conservative leaders. Residents have also spoken up at the Toronto Poverty Reductions. Come hear about these highlights and hot topic issues and engage in conversation about civic engagement in St. James Town.
  
-  ***Safety***- The St. James Town Safety Project has identified community safety issues through a safety audit and individual surveys with more than 1160 residents. Residents have been trained in outreach and engagement to reach out to other residents about these important issues. The safety committee has partnered with City planners, local businesses and landlords to advocate

*for safety a broader level. Come hear more about the recent findings from this project. Come hear about how to get involved and take action on issues of safety in your community.*

✚ **Neighbourhood Improvement and Infrastructure-** *Did you know that there is a Community Improvement plan for St. James Town which includes revitalization plans that will be taking place along Bleecker Street and Ontario Street based on priorities that you as a community set?*

✚ **Youth Network and St. James Town Youth Council-** *This past year the St. James Town Youth Network has had another successful Youth Day in May! Several youth from the community were able to join us to help evaluate our past activities and to provide us with some new and interesting ideas. In the last year, the St. James Town Youth Council – a group of 20+ high school youth who make changes in their community- have engaged in an important initiative to raise awareness about mental health, addictions and tobacco-smoke! They have received training from healthcare professionals and service providers on these topics, and have begun talking to other youth about mental health, self-care and where to get help. They'll be at the Spring Gathering to share what they've learned and to talk to you and other youth about mental health!*

✚ **Senior's Focus-** *The Seniors' Committee rose out of a group of service providers who realized there was a need to support the growing seniors population in St. James Town. The group decided to collaborate and create the Seniors' Mental Health day program (Seniors' Corner). In addition to the Seniors' Corner, the Seniors' Committee also collaborates to provide other fun and exciting services for seniors. In 2015 and 2016, we have worked together to deliver: Winter safety, social groups, educational workshops, tax clinics, flu clinics, and a large seniors' forum in St. James Town. Come hear more about our collaborations, like monthly programming at 55 Bleecker, and some ideas for the upcoming year.*

---

### **Interested in hearing more? Interested in having your say?**

Then please think about the topics above and come join the Spring Gathering 2017 to discuss more, by registering via email, [register@stjamestown.org](mailto:register@stjamestown.org) or phone: 416.324.4100, ext. 5259.

You can also register in person at the event on Friday, April 21<sup>st</sup> at 5:30PM. If you need more information, please call the number above or drop by The Corner, at 200 Wellesley Street East.

**\*\* Please call the number above if you need interpretation, child-minding or ASL interpretation. The space is wheel-chair accessible. Child-minding and light refreshments will be provided.**

**Figure 2 TWO PAGE INFORMATION SHEET TO ACCOMPANY FLYER**



## Planning Committee with Service Providers

The following service providers made up the planning committee. They are all members of the St. James Town Service Providers' Network (SJTSPN):

- Norma Khandaker- Progress Place
- Orit Adose- The St. James Town Community Corner
- Mark Redka- Health Access St. James Town
- Nassim Vahidi – Women's Health in Women's Hands
- Natasha Mercy- Yonge Street Mission
- Diana Mavunduse- Dixon Hall
- Minara Begum- Hospice Toronto
- Cian Knights- St. Michael's Hospital
- Sehr Athar- Sherbourne Health Centre/Lead agency – HASJT
- Christina Tran- Sherbourne Health Centre

Additional agencies that had staff representation during the event via presentations, or formal table facilitation included:

- Wellesley Community Centre
- Toronto Public Health
- Central Neighbourhood House
- YMCA of Greater Toronto, Central YMCA
- Thorncliffe Neighbourhood Office
- Woodgreen Community Services
- City of Toronto, City Planning

14 volunteers were recruited through the Yonge Street Mission.

### Recommendations and Lessons Learned:

- Consider reducing number of planning committee meetings next year;
- Assigning leads to each aspect of the event was very helpful (eg. Agency lead on evaluation, agency lead on child-minding coordination);
- Having a core planning team and additional service providers assigned as table facilitators was very helpful;
- Volunteer recruitment for set-up, registration, food and take-down was extremely helpful and effective and ensured that staff and ambassadors could concentrate on the agenda, participants they invited and table facilitation

## Venue, Logistics and Food Vendors

The Double Gym at Rose Avenue Public School was a suitable venue, and it was chosen due to feedback from the previous years that the single gym was too small for the number of participants, booths and activities.

### Vendors Contracted

Rick Latif	Audio-Visual Services
Access Alliance	Interpretation, translation and language services
Oak Park Deli	For dinner wraps and dessert
Childminders	Childminders recruited through the Rose Avenue Parenting Centre's pool of childminders. This partnership with Rose Avenue Public School's Parenting Centre helped to ensure efficient and reliable childminding services with childminders who knew the space very well.

### Refreshments and Dinner

Meal tickets were handed out at registration by two volunteers. They were handed out to participants after they registered, along with the snack bags (fruit, granola bar, samosa, and water bottle). Raffle tickets were attached (stapled) to the snack bags. The food was catered through Oak Park Deli and generally well-received, along with a snack (purchased from the local groceries stores). The food was distributed to participants at their tables by a group of volunteers. There was time in the agenda for this and this was well-coordinated and seamless.

Generally the snacks seemed sufficient for the participants. Dinner also seemed sufficient and it was healthy (contained the four food groups and had an adequate vegetarian protein alternative. See Table 2 for a breakdown of quantity and costs for food.






<b>Snacks</b>		
Item	Vendor	Cost (for 200 items)
Samosas	585 Parliament St	\$75.38
Banana/Tangerine	No Frills/Food Basics	\$79.28
Granola Bar	No Frills/Food Basics	\$84.89 (on sale)
Paper & Plastic Bags	Dollarama	\$14.13
Water Bottles	Costco	\$20.00
<b>Total</b>		<b>\$273.68</b>
<b>Dinner</b>		
Item	Place	Cost (for 200 items)
Dinner (Wraps/Cookies)	Oak Park Deli	\$1,382.59
Pizza	Pizza Pizza	\$54.69 (for 3 party size)
<b>Total</b>		<b>\$1,437.18</b>
<b>Snacks &amp; Dinner = \$1,710.96</b>		

Table 2

### **Recommendations and lessons learned:**

- Stick to the double gym. Planner feedback and evaluations indicate that there was enough space this year;
- Get a permit in advance and connect with the gym space user (if needed);
- Audio-Visual equipment was good, however feedback was that sound did not carry to the back of the gym and at times there was an echo;
- Top 40 music created a sense of excitement and celebration;
- Next year, each presenter to practice using the microphone beforehand as feedback from the evaluation indicated that many people could not hear the presentations;
- Consider another layout for tables so that everyone is engaged, and to minimize group chatter. For example, MC's could be in the centre of the room, and the tables arranged in a circular format;
- Consider two projectors on either side of the gym so that audience members are better able to see the presentations and be more engaged;
- Next year's signage should be done by hand, on larger coloured paper, in different languages (as opposed to typed and printed on white paper) as people did not know which entrance to the gym to come through;
- Include the venue entrance on the flyer with a map;
- Continue to work with the Parenting Centre to recruit child-minders from the community whom know the space well;
- Continue to have at least 1 Mandarin-speaking interpreter and 1 Mandarin-speaking table facilitator;
- Have clearer slides for the presentations;
- Recommend a hot meal for participants next year;
- Attendance may increase every year, in which case, we should plan for that as we had just about enough food this year;
- Consider donations for food;
- Consider using local caterers for next year's event;
- Consider multiple agency financial contribution towards event funds (interpretation, food)

## Evaluation Form

	<p>Please circle the image that best represents your rating for each statement and add comments in order to help us understand your opinion.</p>				
FEEDBACK	A Lot	Some	A Little	None	Comments (if any)
Was the group discussion effective in terms of all the issues/topics that were discussed?					
The quality of the facilities (rooms, communication aids, etc.) provided at the event was appropriate					
Did you find out the information about the new initiatives in your community today?					
How satisfied were you overall, with the event today?					
Do you have any suggestion for the future events/sessions?	1. 2. 3.				
Do you want us to contact you? If yes, please provide your contact information.	<b>Name:</b> <b>Phone#:</b> <b>Email:</b>				

*Thank you for your participation.*

## Appendix D: Small Group Discussion Guide & Worksheet

### Small Group Discussions Instructions (45-50 mins total)

- ☐ **Introductions-** Facilitators introduce themselves, and how they are connected to SPN / Health Access. Welcome everyone and thank them for their time. Confirm the table “theme”.
- ☐ **Presentation: “What we heard and what we’ve done” – 10 mins**  
Facilitators will present some of the things we have heard, and some of the things we are working on related to the theme chosen at the table, by reviewing “Appendix A” with the participants. Facilitators can share the list with the participants
- ☐ **Individual Worksheets: “Prioritizing Actions” - 10 mins**

**Q1 a) “What are the 3 most important actions we can take as a community with regards to this theme?”** *This could include continuing what we already have, improving what we already have been doing or identifying a new action.*

- Participants use the individual worksheets and spend some time writing down their 1-3 top priority actions on theme X and reasons why. Individuals can write their responses in their own languages.
- They can come up with new ideas/areas of action or choose from the list of current and upcoming actions in the Appendix.
- Facilitators should encourage them to use action-oriented language (eg. verbs like continue/develop/work with etc.)

- ☐ **Table Group Discussion: – 20 mins**

**Q1 b) “Please share your top action area and why.”** *If it’s an existing action then explain why we should continue to do it/ do more of it. If it’s a new idea, explain what it is and why it is needed.*

- Facilitator will ask each participant to share their top priority and to explain why that is their top priority. People can use the space on their worksheets to make notes for themselves
- The Note-taker will capture why people choose their priority
- The Facilitator can reflect on common themes or competing priorities to promote discussion at the table. These discussions should be captured by the Note-taker on flip chart paper.

**Q1 c) Additional questions posed by the facilitators**

- If there is time, the facilitator can ask about specific gaps that have come up from the conversation, or ask a pre-determined burning question identified by the SPN subcommittees (eg. Youth Network, Seniors Subcommittee). Examples: What are some things we can do to specifically address seniors’ isolation?; How can we get youth more involved in programs?; What can we do to engage newcomer men?

## Worksheet Template

### Exercise: Priority Setting:

This is an individual exercise where you can think about your priorities. Please feel free to come up with new ideas, and/or areas of action, or choose from the list that your facilitator shared with you/ will share with you. Try and use action-oriented language (eg. verbs like “continue to, develop, work with”)

**Q1 a: What are the 3 most important actions we can take as a community with regards to theme [\_\_\_\_\_]? *This could include continuing what we already have, improving what we already have been doing or identifying a new action.***

The three most important actions we can take as a community regarding [theme: \_\_\_\_\_] are....

1) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**WHY?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**WHY?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**WHY?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Q1b: Please share your top priority and tell us why?**