



Confronting Poverty:

Issues and Opportunities
for Creating Public Policies that will move us
from Exclusion to Inclusion in Atlantic Canada

Report of an Open Space Meeting

Halifax, Nova Scotia
November 22-23, 2001

Table of Contents

Introduction	1
Open Space Meeting Process	2
Results	3
Plans for Future Action	
A: Bringing Community and Government Together.....	6
B: Developing an Inclusion Lens.....	7
C: Engaging the Business Community	8
D: Popularizing the Concept of Social and Economic Inclusion with the General Public	12
E: Racism	15

Appendix

Discussion Group Reports

1 Exclusion of the older person.....	17
2 What are some steps in bringing community leaders in social development together with senior government in the capitals? How can we empower people so that they can empower their community? How does the community infiltrate and join the policy development table?18	
3 Poverty/education and its relation to health and health policy	22
4 Access to education and training	25
5 Housing	26
6 Disability	27
7 How do we connect our work across sectors and provinces and country to add to the big picture and develop strategies at the provincial and national levels?	29
8 Building support within government	30
9 How do community, bureaucratic and political realities affect social inclusion?.....	31
10 Developing an inclusion lens	32
11 Engaging the business community as champions of social inclusion.....	34
12 What do we need to do to popularize the concept of inclusion with the general public?	36
13 How to reach out to those who fall between the cracks and how to empower them?	38
14 Food Insecurity: How to engage the key players in the dialogue on developing healthy public policy to build food security.....	39
15 Youth exclusion to inclusion.....	41
16 How can we influence public policy to introduce the community health centre model as a means to provide inclusive/holistic primary health services and supports in communities? ..	43
17 Supporting single parents through support for their families	45
18 Racism – What is it?.....	46
19 Brain Injury.....	48

Introduction

As part of an Atlantic-wide project entitled *A Just Society*, a two day Open Space meeting was held in Halifax in November 2001 to develop plans for action to promote social and economic inclusion in Atlantic Canada. The meeting was organized by the Maritime Centre of Excellence in Women's Health and funded by the Population and Public Health Branch, Health Canada.

Open Space Technology was chosen as the format for the meeting because it is highly participatory, uncovers all the issues and opportunities within a theme that anyone cares about, ensures a discussion and a prioritizing of each issue, and engages participants in action planning.

The theme for the meeting was:

Issues and Opportunities for Creating Public Policies that will move us from Exclusion to Inclusion in Atlantic Canada

Fifty-two participants from all four Atlantic provinces and from the public and voluntary sectors attended the meeting, which began at 10:00 a.m. on November 22nd and ended at 3:00 p.m. on November 23rd.

The meeting opened with a welcome from Linda Snyder, project coordinator, Carol Amaratunga, Executive Director, Maritime Centre of Excellence in Women's Health and Kathy Coffin, Regional Director, Health Canada. Representatives from three provincial reference groups then briefly summarized the work they had accomplished during the project.

After these presentations, the workshop facilitator, Susan Lilley, explained the Open Space process and highlighted the theme for the meeting. She emphasized that the group was to focus on issues and opportunities that must be considered when developing an action plan to meet these challenges. She emphasized that no topic was too big or too small if someone really cared about it. Participants then proceeded to develop their agenda, meet in small discussion groups, and produce reports on the topics that were of importance to them.

This report describes both the Open Space meeting process and the results of this meeting. It includes the action plans developed at the meeting, summaries of all the discussions, and a full participant contact list.

Open Space Meeting Process

Open Space Technology is a meeting process that provides groups with just enough structure to get the work done, while providing the freedom for the full expression of passion, creativity, inspiration and innovation. During an Open Space meeting participants create and manage their own agenda of concurrent working sessions around a central theme of strategic importance to the group. The result is a powerful, effective connecting and strengthening of what's already happening in the community: planning and action, learning and doing, passion and responsibility, participation and performance.

In consultation with the facilitator, the sponsor of an Open Space meeting identifies the theme, the parameters for action and the invitees, who are then invited to attend and to create the agenda together. Participants begin by sitting in one large circle. The sponsors open the meeting. The Open Space facilitator states the theme and parameters for action, then engages the leadership in the room and states the principles and law that govern behaviour in Open Space.

Principles of Open Space:

- Whoever comes is the right people. (Reminds participants that the solutions are present in the room and not to worry about who is present or not)
- Whatever happens is the only thing that could have. (Keeps the attention on the best possible efforts in the present time)
- Whenever it starts is the right time. (Reminds people that creativity can't be controlled)
- When its over, its over. (Encourages people to continue their discussion as long as there is energy for it.)

Law of mobility:

If you are neither learning nor contributing – Move on!

Participants then identify topics related to the theme for which they have passion and will take responsibility, and post each one on the wall, with a start time and location for the discussion. All participants then go to the wall to select discussion groups and negotiate changes. It is intentionally chaotic and creates an agenda owned by the participants.

Those who initiate topics start their group's discussion and ensure that a record of the discussion is produced. New agenda items can be posted at any time. Participants get a copy of the report on-site at most events. The book of proceedings is used to converge energy, set priorities and determine next steps. The facilitator's role in an Open Space Meeting is to open and hold the space for participant initiative, learning and self_ organization, and to guide the convergence process.

Results

Twenty-five issues and opportunities were identified during the first day of the meeting. Some of these were combined so that 19 discussion reports were produced during the first day. These are listed below and included in the appendix.

List of Topics Discussed and Reports Produced

- | # | Title |
|-----|--|
| 1. | Exclusion of the older person
What are some steps in bringing community leaders in social development together with senior government in the capitals? How can we empower people so that they can empower their community? How does the community infiltrate and join the policy development table? |
| 2. | |
| 3. | Poverty/education and its relation to health and health policy |
| 4. | Access to education and training |
| 5. | Housing |
| 6. | Disability |
| 7. | How do we connect our work across sectors and provinces and country to add to the big picture and develop strategies at the provincial and national levels? |
| 8. | Building support within government |
| 9. | How do community, bureaucratic and political realities affect social inclusion? |
| 10. | Developing an inclusion lens |
| 11. | Engaging the business community as champions of social inclusion |
| 12. | What do we need to do to popularize the concept of inclusion with the general public? |
| 13. | How to reach out to those who fall between the cracks and how to empower them? |
| 14. | Food Insecurity: How to engage the key players in the dialogue on developing healthy public policy to build food security |
| 15. | Youth exclusion to inclusion |
| 16. | How can we influence public policy to introduce the community health centre model as a means to provide inclusive/holistic primary health services and supports in communities? |

17. Supporting single parents through support for their families
18. Racism – What is it?
19. Brain injury

Copies of all reports were distributed to participant on the morning of the second day. Participants were given time to read these and then vote on them based on what they personally felt most energy for at the time with the information they had available. Each participant received five votes and could use all five on one topic or spread the votes around. Participants then worked together to group the topics that emerged as priorities according to areas of overlap. Five reports were clustered to create one priority for action, and a total of five action plans were developed:

Action Plan A: Bringing Community and Government Together

Discussion reports considered in this plan:

What are some steps in bringing community leaders in social development together with senior government in the capitals? How can we empower people so that they can empower their community? How does the community infiltrate and join the policy development table?

Poverty/education and its relation to health and health policy

How do we connect our work across sectors and provinces and country to add to the big picture and develop strategies at the provincial and national levels?

Building support within government

How do community, bureaucratic and political realities affect social inclusion?

Action Plan B: Developing an Inclusion Lens (discussion report #10)

Action Plan C: Engaging the business community as champions of social inclusion (discussion report #11)

Action Plan D: What do we need to do to popularize the concept of inclusion with the general public? (discussion report #12)

Action Plan E: Racism (discussion report #18)

A few topics were neither top vote-getters nor subtopics of the primary vote-getters. These were not included in any of the action clusters, however, participants were reminded that they were not unimportant. They were invited to move these topics into action if they wanted to, however, they were not the topics for which the group had energy at this time. Participants chose not to move these topics into action during the meeting, however, they may be considered as items for future action:

Topics for Future Consideration:

1. Exclusion of the older person
4. Access to education and training
5. Housing
6. Disability
13. How to reach out to those who fall between the cracks and how to empower them?
Food Insecurity: How to engage the key players in the dialogue on developing healthy
14. public policy to build food security
15. Youth exclusion to inclusion
How can we influence public policy to introduce the community health centre model as a means to provide inclusive/holistic primary health services and supports in
16. communities?
17. Supporting single parents through support for their families

Participants then met for two hours to begin to develop action plans for each of the five priorities. They were asked to identify next steps, resources required, and a champion and volunteers to move each plan forward into the future. The following action plans were developed.

Plans for Future Action

Action Plan A

Bringing Community and Government Together

Champions: Linda Snyder, Cathy Wright, Phil Warren, Jane Oram, Tim Turner, Patty Williams. For number 9 (below), all of us.

Others who would like to be involved: Stella Lord, Brenda Murphy, Linda Snyder, Anthony Knight, Lucinda Montizambert, Patty Williams, Colin Holloway, Dana Spurrell, Jane Oram, Fiona Chin Yee, Michael Rushe, Katherine Reed, Phil Warren, Kathy Coffin, Tim Turner, Jane Warren, Janet Thomas.

Other reports to be considered: We will need to stay connected to the people working on bringing the business community on-side, so we can make sure we communicate in ways that resonate with people and make sense to them in this political climate.

Action required:

1. Paint a picture of the challenges of Atlantic Canada to be made into a Power Point presentation to be used by government, community, etc.
2. Create a mechanism to stay together.
3. Using creative approaches, market tools and approaches that would lead to social and economic inclusion. (HC tool for community participation in policy development process)
4. Identify and champion successes.
5. Make a presentation to the Council of Atlantic Premiers and other strategic Atlantic networks..
6. Develop timeline for these actions.
7. Go home and connect with counterparts in other Atlantic provinces to develop an Atlantic block and position on issues affecting social and economic inclusion.
8. Develop some measurement tools. (Accountability/indicators of success)
9. Find the champions.

Action(s) planned:

The working group identified under “Champions” above will keep all of us connected and will seek ways to advance this strategy.

Action Plan B

Developing an Inclusion Lens

Champion: Malcolm Shookner

Others who would like to be involved: Moyra Buchan, Bobbie Boland, Marie Corinne Bourque, Judy Hughes, Maureen O'Connell, Sandy Bentley.

Other reports to be considered within this discussion: #8, 9, 12, 18, 1, 6, 15, 17

Action(s) planned:

- Develop an Inclusion Lens to be tested in a variety of settings and with people who have been excluded by February 2002.
- Establish a reference group to work with Malcolm in designing the lens.
- Use plain language to make it accessible to people who are excluded.
- Develop a plan for testing the lens in a variety of settings.
- Implement the plan for testing the lens and evaluate it.
- Make it widely available for use in the work of all involved in this workshop and others.

Next steps:

- Draft lens out to reference group in December 2001
- Second draft ready by mid-January 2002.
- Final version ready for testing by February 2002
- Develop a plan for testing (February 2002)
- Implement the testing and evaluation of the lens (March2002)

Action Plan C

Engaging the Business Community

Champions: Anne Marie Maloney and Mary Simpson

Others who would like to be involved: Monica Chaperlin, Janet Guildford, Georgia MacNeil, Auréa Cormier, Rose Brooks, Fiona Chin-Yee, Maureen O'Connell, Patricia Rustad.

Other reports to be considered within this discussion:

Popularizing the notion of Social Exclusion for the General Public (report #12, action plan D).

The Case Study and Lessons

The Business Community Anti-Poverty Initiative (BCAPI) of Saint John New Brunswick provides a good real-life case. The short version of the story is that one business leader stopped to ask a pan handler on the street in Saint John why he was begging. He replied that it was a simple necessity: \$200 of his \$267 monthly income went to board; he lived off the remainder.

Mr. Bill Gale called the Executive Director of the Community Health Centre to find out why this was happening. She sat up and listened when he asked "If you had one million dollars, what would you do with it?" He became intrigued, made a series of personal phone calls to elicit the involvement of his colleagues: top Executives and CEOs in the Greater Saint John community. They began a process of learning and tackled the issue as they would any business problem. They commissioned Deloitte & Touche to carry out a "market analysis" which provided an analysis of the problem and nine recommendations. Outcomes to date include a job fair, explicit hiring of people living in poverty, supporting a home for teenaged mothers, and dialogues about policy barriers. The group's work was recognised by the prestigious Peter Drucker Foundation for community leadership and after four years of work, these business leaders are ready to talk about their process.

One of the interesting lessons was the breathless complaints from seasoned consulting researchers who complained vehemently about the difficulty they had navigating the system of social services and community organizations that offer services to those living at risk. They couldn't imagine how people living in poverty could get the services they need when they are so hard to access.

The BCAPI group organized a Job Fair for those who need work and prepared for 400 people. Instead, 1500 people showed up, dressed for success, eager to find a job. This experience exposed the myth that the poor don't want to work.

This initiative provides some lessons that may be transferrable. The following factors are recognised as success indicators (at least in this particular case):

Readiness at the Community Level:

- The business community must be a the “tipping point”¹. They must be ready.
- There must be a catalyst, a “**sparkplug**” who will take on a leadership role. This sparkplug is heart felt about the poverty issue, is well-connected, prepared to champion this issue, and can mobilize business community.
- Fellow business leaders, the so-called “boy’s club” is **enlisted one by one** by the catalyst. The people at the top, not employees, are brought to the table because they are the ones that can ensure action.
- The business leaders **work hand-in-hand with the social agencies** through a mutual learning process whereby both learn from the other group. In the process, the business community takes ownership of the issue of poverty.
- The business community **learned best by hearing testimonies**. They were less interested in what the social agencies had to say; the social agencies provided people experiencing exclusion who were willing to speak with the business group.
- Social agencies must overcome their suspicions and let go.
- The learning and planning **process takes a fairly long time**. (In this case, about three years.) Trust, respect, and ownership result.
- This process is **peer led**. Business leaders working with business leaders. The social agencies provide support, information.
- The **business community owns the process** and uses their own language and concepts. BCAPI’s slogan is “Putting poverty out of business. Poverty is our competitor. We must refuse to fail.”
- Avoid using confrontation and denigration tactics. While this type of advocacy has its place, this is not the place.
- They tackle the issue using **business tools and approaches**. BCAPI’s nine recommendations were ambitious yet discrete tiered actions. They have started with little tasks and are gradually working their way up to structural issues requiring policy changes (although that is not the language they would use.)
- Through the testimonies, the personal experiences, and accurate information, **the business leaders experience exclusion in a real way**. It is internalized. The business community needs concrete information. It has to be real.

¹ Malcolm Gladwell, The Tipping Point.

- There is a **critical mass** of well-chosen leaders learning and acting together. As they work through the learning process, they begin to realize how community development works; why it is important that one business leader participate in other community round tables; why being a good corporate citizen is not enough.
- The business community **does not look to the government until they are good and ready** with homework done, short term results achieved, and longer term actions articulated which require a role for government.
- This **work starts in the community**. Define the geographic community. Who's living there? Define the issue.
- Be flexible.
- **Respect business principles** and the business community's approach. Don't foist social constructs, theory, and language on the business community.

Actions planned:

- Recognizing that this type of community-level action also needs top-down leadership and that the "Tipping Point" can be precipitated by external factors, we also need to gauge the national business community.
- Find out what critical business and opinion leaders are saying about social exclusion and poverty. (E.g. Gro Brundtland, John David Beattie, Peter Drucker, Business for Social Responsibility, IMAGINE). Use that language when talking to the business community. The right language will be understood by both sectors: social and business.
- Arrange for the BCAPI group to write up their story and ask them if they are ready to talk to their business peers in other cities.
- Look for opportunities to extol the BCAPI work and its recognition by the Drucker Foundation.
- Arrange for Saint John business leaders to talk to business leaders in other communities.
- Keep our group in touch by fax and e-mail.
- Send press package with letters to editors of Atlantic business magazines and general press asking them to pay attention to this issue because it's hot and is noticeably absent.
- Look for upcoming events such as the Canadian Policy Research Institute's national conference in Halifax in the spring that is looking at social inclusion.
- Include the language and arguments of Social Investment in the reasons why business should be interested in this issue.

Next steps:

- Aurea Cormier, NB Pay Equity Council, will approach key Chambers of Commerce to brief them on the issue of pay inequity for women and will ask them to advise on how to articulate this issue in a way that the business community can understand. She will look for a potential spark plug that might take up this issue.
- Anne Marie Maloney: Will report back to BCAPI and find out if they are ready to speak to their peers in other places. Anne Marie will fan out information about BCAPI in the form of a story, approach, and the Drucker award.
- Maureen, ACOA will follow-up to see what opportunities and audiences can be recipients for this information. What might be done at the ACOA level to fan out information and piggy back on to gatherings.
- Mary Simpson will ask Nadine for help in preparing packages for business media. Include one to Atlantic Provinces Economic Council. Find out what the Council is up to. Also send one to Brian Crowley at AIMS and get his response.
- FemmJEPP will include this approach in their work plan and will followup with group.
- Mary Simpson will act as information broker to the group. Anne Marie will act as link to BCAPI business leaders and information resource.

Resources required:

- Speeches and declarations of business leaders who are recognising business responsibility for social health and inclusion.
- The writings and tools of the Caledon Institute and Sherri Torjman.
- BCAPI business leaders.

Action Plan D

Popularizing the Concepts of Social and Economic Inclusion with the General Public

Champions: Everybody here. Making these ideas available and accessible to the general public will require that many people spend a lot of time talking about it to anyone who will listen. This will involve:

- Talk about inclusion. Use the word until everyone you know is used to hearing it and knows what it means.
- Make inclusion a part of you life – family, social and work life
- Name inclusion when you see it
- Take inclusion back to your work and volunteer activities –e.g., encourage organizations in which you are active to incorporate inclusion into mandates, job descriptions and the way in which they do things – into their process. Ask for resolutions at AGMs – even if they don't pass they are an opportunity for discussion.
- Help politicians to make the connections between exclusion and more concrete issues. Help them to see that inclusion is not just good policy, but also good politics.
- Identify yourself as someone who is willing and able to lead discussions on inclusion – e.g., at regular meetings of community groups

Resources identified:

- Atlantic Popular Education Network (Susan LeFort, contact)
- Basic Information on Social and Economic Inclusion Kit (available from MCEWH)
- “Everybody Counts” workshop kit (Moyra Buchan, contact)
- Community Inclusion Tool Kit produced by the Community Inclusion Project: this resource is specific to including mentally challenged people in their communities but the ideas and approaches can be use in inclusion generally. (Available at: inclusiontoolkit.com)

Everything produced on inclusion can be part of public discussion but will need to be formatted in a easy-to-read, use and understand format.

Action(s) proposed:

The overall goal is to make inclusion a priority for ordinary people. However, whatever approach is taken, it is essential that any public education effort be based on the understanding that we are trying to foster a broad understanding of inclusion, not just to make it palatable to the general public.

The community has an intuitive understanding of what exclusion means and feels like and it is important to support this by acknowledging that while the impacts of exclusion are felt directly by individuals, the solutions are societal and systemic. Inducing individual guilt will not foster public-buy-in.

- Use stories as a way help people put facts/ stats into context. This approach would have to make clear connections with systemic issues to avoid individual blame. It will also be important to avoid stereotyping and to show how policies and attitudes impact on individuals.
- Find the questions/triggers that will help people make connections and understand how they could become part of an excluded group, e.g., poor, homeless – “How could this happen to me?”
- Use workshops (like “Everybody Counts”) as a way to get to people’s gut and give them the experience/feeling of exclusion. This process would acknowledge and accept each person’s story by recognizing it’s importance to that individual’s personal experience/understanding.
- Make a commitment to identify/name inclusion when we see it. Move beyond a problem-based approach and propose inclusion as a solution. Look at both successes and the reasons for success.
- Identify key people who are able and willing to use tools (e.g., Basic Information on Social and Economic Inclusion Kit) to present/introduce Inclusion to groups in their community. Offer to lead a discussion or participatory segment as part of the program at one of the group’s regular meetings.
- Legislate inclusion! This is a long-term effort and will require wide public support and careful cultivation of politicians. It will also require careful monitoring throughout all stages of development – legislation, regulations, implementation, etc.
- Make an effort to learn how business gets the ear of government (aside from campaign contributions!). Learn “how to play the game” and use this as a source of ideas for advocacy approaches.

Resources required to raise the profile of inclusion and garner public support:

- Funding for Atlantic Region-wide projects to create public awareness
- Publicizing projects that model inclusion and inclusive processes
- Funding for an overall, region-wide, media-based public education campaign
- Encouraging all funded projects to include a public education/awareness component.

Who was there:

Linda Goggin, Fiona Chin-Yee, Jan Catano, Joyce Hancock, Susan LeFort, Vanessa Mercer-Oldford, Martine Godbout

Action Plan E

Racism

People who would like to be involved: Twila Day, Sharon Davis-Murdock, Sandy Bentley, Lucinda Montizambert, Roxanne RJacob, Rose Stewart, Harriet McCready, Yvonne Atwell, Stephanie Hunter, Maureen O'Connell (for action on self-love)

I. Research and Development of Synthesis Papers

Co-Champions: Sandy Bentley and Yvonne Atwell

Action Planned:

- Seek funding for research and development of synthesis papers and incorporate other areas through the research and discussions with minorities – e.g. incorporate various aspects of society – e.g. workplace, market place, education, health system, etc – go out to all minority cultures and get input and look for “commonalities” and delineate actions needed
- Keep it moving forward under “grass-roots” driven process using the research as a discussion piece – e.g. workshops in minority communities then out to all populations including the dominant culture.

Next Steps:

Co-champions check into funding possibilities
Keep group participants informed virtually

II. Influencing government/public sector and unions re: hiring policies and procedures, interviewing/evaluation/monitoring processes and bargaining agreements

Champion: Stephanie Hunter (unions), To Be Identified (government)

Action Planned:

- To begin Stephanie will speak with some labour allies to discuss how to raise issue and get action within union movement. Will inform others in this group and then see about identifying other champions/allies in government and/or political realm and see what next steps could be initiated.

III. Self-Love for Children of Minorities

Champion: To be identified

Required Action:

- Begin identifying where and how to spread awareness and action to individual communities and society as a whole – public awareness and education system
- Spread to individual communities – Identify where to raise the question and how this could be mobilized.
- Suggest having incorporated as a “mental health” issue within population health
- Get the concept added to the education curriculum
- Keep in mind the relevance of this issue with regard to adoption as well
- Identify champions within the education system and at the community level.

Some areas for possible incorporation of the importance of self-love and education around same are: - home schools, day care, parent and child resource centres, community centres, Sunday schools, primary school system, teenage centres and drop-ins

- Identify forums and develop and offer workshops at the community and regional levels
- Again, this group will keep in touch virtually

Overall Action:

- Provide opportunity during report back for workshop participants to become involved or offer other suggestions
- Flip chart posted for names to be added.

Maureen O’Connell signed up to be involved in the self-love actions. Judy Hughes suggested approaching HRDC and/or Health Canada for development of booklet or other resource(s) regarding history for increasing public awareness in the education system. Yvonne shared what is already available but not being used.

Highlights of Discussion during Action Planning session:

The discussion began with further delineation of issues, concerns and barriers to overcome in creating “real” change; some day-to-day examples of the still pervasive attitudes and behaviours demonstrating racism in Nova Scotia were shared. A few of the major barriers and concerns discussed were:

- Power dynamics – e.g. “white” racism – meaning that racism is perpetuated by the dominant culture with the power
 - The dangerous and all too common attitude by members of the dominant, white culture that “racism is in the past and no longer exists” and their too often expressing that they “don’t understand what is wrong with those people, enough about it already, etc.”
 - Lack of recognition as a “societal issue” – racism is very complicated; some people don’t even know that they are racist
 - The need for children in minority cultures to have to fight against “self-hatred” because of the negative messages and treatment by the dominant culture.
- This requires education and focus on development of “self-love” in children of minority cultures.

Strategies for Action:

Name IT – Racism needs to be fully defined and recognized by everyone in society. The realities of racism must be “outed” – e.g. hiring practices and policies, institutional racism that is often buried, lack of research data excused by “statistical insignificance” because of size of a population, etc.

Education:

- Individual, community and societal level
- Within the whole education system
- Knowledge of history – own cultural history and a critical analysis of history in order to reflect the reality of what has really happened and what exists as a result
- Need the objective reality in the historical perspective to help in overcoming prevalent racist attitudes and to enable “real” change
- “Self-love” is a major issue for children of minority cultures – the education system and the dominant culture has to realize that negative images constantly bombarding young children are self-destructive and lead to young children not being able to love themselves for who they are - this is of key importance and immediate concern for action.

Influencing government/public sector including unions:

- Policies and procedures such as hiring policies. Also, interviewing, evaluating and monitoring processes – e.g. don’t see own “biases” in interview and selection processes. This brings up the whole question of what is “fair” and the recognition that it is “not a level playing field.”
- This includes looking at bargaining agreements and other union policies and practices directly impacting on hiring practices within the public sector. At present, in a “catch 22” position – e.g. 80 - 90% of positions filled internally so not getting diversity brought into the workplace while at the same time the public “myth” exists that affirmative action is enabling minorities to be hired and causing reverse discrimination against “whites”
- Need to have mechanisms and structures to enable the implementation of effective hiring policies and practices.

Public education/awareness strategy

e.g. what is “fair” and how the “power” dynamics work

Need population health data on ALL populations

- e.g. not acceptable to be excused by “statistically insignificant” justification for not doing adequate population health research in all populations

Appendix: Discussion Group Reports

Report #1: Exclusion of the Older Person

The need to be better aware of what happens; how there is a perceptual change in the way younger and middle-aged view the capacity – or the lack of – in brain power of the senior

Host: Patricia Rustad

Participants: Maureen O’Connell, Stephanie Hunter

Highlights of Discussion:

- negative stereotyping of seniors has led to exclusion – perceived as not being able, creative, capable of learning, capable of teaching, etc.
- this stereotyping will probably start to change as the largest cohort of the population is the baby boomers who are on the verge of becoming seniors. The change in stereotyping is not occasioned by social inclusion but by market forces.
- intergenerational exchange – we need to encourage wisdom and learning exchange between youth and seniors. The lack of exchange creates a learning deficit in communities and in the workplace.

Action Recommended:

- Public awareness about the value of seniors/inclusion – ie creativity, ability is not a function of age.
- This needs to lead to a cultural or attitudinal shift about seniors.
- We need to look at how to keep seniors in communities and homes if that is the choice they want to make – homecare, supports, home design – look at example of New Dawn in Sydney where duplexes have seniors on one side with a family on the other who assist the seniors.
- Examine current policies that have a negative effect on seniors if the senior goes into care – housing policy and assets.

Report #2:

What are some steps in bringing community leaders in social development together with senior government in the capitals? How can we empower people so that they can empower their community? How does the community infiltrate and join the policy development table?

Hosts: Brenda Murphy, Cathy Wright, Marie Corrine Bourque

Participants: Katherine Reed, Stella Lord, Tracey Williams, Kathy Coffin, Anthony Knight, Linda Snyder, Malcolm Shookner, Patty Williams, Janet Thomas, Phil Warren, Anne Marie Maloney

Highlights of Discussion:

- We want champions, for example the Business Community Anti Poverty Initiative in Saint John
- We need political will – for example in Newfoundland, a strategy was developed with community involvement
- It can take a social crisis to bring about political and community will. Issues can be a catalyst to bring people together.
- Sustaining the momentum is a challenge.
- Break down the silos so that communities can talk to the whole.
- For intersectoral work to happen, it needs to be an issue or agenda item for all departments.
- In Nfld, they are recommending that each Cabinet document include implications for strategic social development.
- We need to learn how to partner. We need to start where people are and talk each other's language. Make it politically sellable.
- Newfoundland example of working together can be risky and there has to be a vehicle for a risk free environment.
- We need a shared vision between government and community agencies.
- We need to each get a copy of Fiona's paper on key learnings to date.
- We need to learn how policies are made.

- Each partner often feels they are not understood.
- Social and economic development have to go together.
- Building relationships is important.
- Business can be very important in influencing government because government still sees progress through an economic lens.
- We need to find the vehicles for people with vested interests to come together.
- Communities need to have information on social and economic situation, for example community accounts model in Newfoundland.
- Stories are important so that all of us understand the real issues attached to the numbers.
- We need more women as Cabinet ministers.
- Community could be catalysts, for example we have committees only of government staff and politicians and no avenue for community involvement.
- Atlantic Canada needs to stick together. We need to follow up on a recent paper written by Atlantic Canada premiers.
- We should get the Newfoundland premier to help arrange for a presentation to the other premiers.
- Also look to the Atlantic Provinces Economic Council for support and involvement.
- Community groups have to together clarify their own agendas and strategies.
- We need to find ways of dealing with federal and provincial disconnects.
- We need to move away from the individual to systemic causes. We need to challenge assumptions around poor people. To bring people on board we still need to understand the individual
- PolicyLink New Brunswick is new initiative of federal and provincial governments and the voluntary sector focussing on policies and poverty.

Actions Recommended

- We need to follow up on a recent paper written by Atlantic Canada premiers.
- We should get the Nfld Premier to help arrange for a presentation to the premiers. And involve Atlantic Provinces Economic Council in this meeting.
- We need to find champions in our communities and use champions to influence political will.

Report #3: Poverty/Education and its relation to health and health policy

Host: Deborah Kiceniuk

Participants: Colin Holloway, Vanessa Mercer-Oldford , Dana Spurrell,
Jane Oram, Georgia MacNeil

Highlights of Discussion:

- Discussion about how the determinants of health, such as education and income, effect health and permeates lives as well as acting as discriminatory factors for opportunities (lost)!
- How can we facilitate the inclusion of the factors, such as the determinants of health (income and education) in public policy.
- Out of the Box..knowing that there is another world other than one's own discipline, learning about the other aspects of social policy, through work policies and education
- Social and economic issues have to be discussed together
- The importance of the impact of communities identifying needs through evidenced-based decision- making. We should look at the individual level to understand needs.
- The importance of collecting information at the community level (social accounts NF), both as sources of quantitative data which can be coupled with and support anecdotal information to aid in decision- making, which can be later used both as evidence and as benchmarks.
- The importance of emphasizing early childhood development as the key to healthy adults. The effect of poverty and education on alleviating the many factors associated with poor health which can follow, and be compounded, during the lifespan.
- In particular with post-secondary education.....there is increasingly a barrier to access because of rising costs and the lack of support for students. This affects health because students are having to work 2 or 3 part-time jobs and maintain course-work which leaves little time for looking after their health. "Time crunch" issues.
- Those who lack the personal resources (money, family) to pursue a higher education do not have access to higher education. Education is a determinant of health and may be the basis of acquiring a higher paying job with benefits and pension. Otherwise people are restricted to minimum wage jobs and cannot advance.
- There is also a need to reveal how social networks can influence advancement through post-secondary education. Students must come to realize this aspect of the educational community.

- Recognition that devolving power to the regions can be threatening to government and other decision-makers. This can be a barrier to changes in social/economic policy.
- Aggregate resources: i.e a new school can be the focal point of a community that can be used for various groups (seniors, health or family resources centres). This must be decided before the school is built and adds value to the resource from both the community and decision-makers.
- Issues over “code of ethics” for government officials. Involvement is not just a ten-minute talk!
- Feedback to community groups is integral to policy development. Input is a continuous process.

Recommendations/Actions to alleviate some of the barriers:

People with authority to make decisions should be at the table with community groups and or partners. Departments and organizations have to support the decisions made by those at the table and be informed about this in the beginning.

Policies and business plans of departments/organizations should be flexible enough to allow decisions to be made within a general framework to allow policy changes that are “community-minded.”

Social and economic policies (i.e. public policies) should be developed within the determinants of health framework.

Break down silos and get rid of the issues surrounding which “piece” belongs to which department by involving multi-departmental groups in policy-making.

To make policies relevant to communities you need to start at the regional level and move up through government.

Developing trust is a key to getting people from government and communities at the table to discuss social and economic issues. One way is by outlining roles and expectations and setting clear objectives in the beginning of the process. e.g. the ADM is not an authority at the table he/she is a parent and community member. Members must understand that it is important to have consistency in attendance and with roles.

There is a need to educate partners about regional differences to create understanding that there may not be generic problems/issues. Each community/group may have specific concerns not seen in other parts of the province/country.

Timelines/goals should have both short and long-term milestones, and the process should involve reflection on what has been accomplished and what is left to be done.

Expectations and commitments have to be individual. People should only contribute as much as they can. Players set their own boundaries.

With respect to education:

- Relief on interest rates when loan repayment is due.
- Student loans should be coupled with educational grants and based on needs.
- Policy with respect to single mothers receiving community assistance while attending university has to be revisited. This is discriminatory.
- Need to pay more attention to success stories...what has worked in the system and what policies act as barriers.
- Employ key people who can move a coordinated approach into policy development with a community needs focus. i.e someone who is responsible for bringing people together, providing information about objectives, roles, expectations, and milestones who (ideally) is not accountable to a government department and can monitor the process from a neutral perspective.

Report # 4 : Access to Education and Training

Host: Janet Guildford

Participants: Janet Guildford, Georgia MacNeil

Highlights of Discussion:

- Research proves that education and training improves earnings/income, as well as health status.
- Social privilege/inclusion comes with education.
- Making good educational policy requires an integrated, collaborative approach (across sectors, departments, and agencies and must include participation of individuals and communities as equal partners in the policy and program development process.
- A range of support and complementary services must be available to support access to education and training (eg literacy/academic upgrading, self-esteem and life-skills development, childcare and transportation, provision of special needs etc.)
- Access to post-secondary education has become more difficult:
 - higher tuition costs
 - higher admission standards
 - minimum wage and part-time jobs no longer provide a living wage, or tuition

Action Recommended:

- a provincial working group to develop/advocate for policy and program changes
- lower costs for education
- removal of barriers – child care, transportation
- increase in minimum wage
- change in social assistance policy – allow recipients to access university education

Report #5:**Housing**

Host: Katherine Reed

Participants: Katherine Reed, Stephanie Hunter, Georgia MacNeil, Janet Thomas

Highlights of Discussion: Atlantic provinces need to stick together in resisting implementation as is of the new program Ottawa is trying to implement. It hasn't had the necessary input from the provinces, and it is not going to meet the needs of many people in this region.

There is a need for better research to demonstrate very clearly the links between bad/unaffordable housing and perpetuation of poverty, inhibition of human productivity, waste of investments in for example, healthy child development and education.

We need to use very convincing research to influence the policy makers and decision makers. This is not easy, because there are many examples of these people knowing perfectly well that there is a terrible waste of human potential. The policy decisions are ideology-based, not driven by logic.

We need to find the hook to persuade decision makers. Call it flavour-of-the-month, or whatever, but policy makers live and breathe in a climate where suddenly everyone is talking about "child poverty" or "homelessness" or "brain-drain," etc. Maybe we can get them all fired up about "social/economic investment."

We need to learn from Newfoundland – they have women in leadership, they are "de-siloized," and they have good, community-minded people working with commitment. We have the people, but we don't have a shared vision, we are in silos, and we don't have the women in these powerful roles. (We certainly have some very good women who could fulfil these roles!)

Report #6: Disability

Hosts: Judy Hughes and Jane Warren

Participants: Auréa Cormier, Twila Day, Martine Godbout, Linda Goggin, Margie Macdonald

Highlights of Discussion

- The discussion began by Judy giving an overview of the reality of the situation concerning all people living with limitations and or disabilities.
- This population in Nova Scotia has been forgotten by most of the community, political, spiritual, business and policy advisors within the Atlantic region. It seems particularly in New Brunswick that having strong leadership does make a difference and does move things forward.
- Our discussion started at the school system and in fact when you think about the support necessary to bring a child to school age, we needed to begin earlier.
- “If you do not live it you do not see it” most politicians, policy advisors, employers, retailers, hotel owners etc, in fact all that are not associated with disability, do not take into consideration the practical accommodation that is afforded everyone else in our communities. For instance would you consider not turning on the lights when you come into the room or not putting chairs out when you have a meeting. WE all live in a world where we ALL need accommodation of some degree or another.
- The Disability Community is the most impoverished, in need of literacy training, isolated, and lacking in the basic amenities that most of the world take for granted.
- We also need to consider internal and external barriers: Internal in that this population has a 50% more chance to be abused sexually, physically and 100% more chance for emotional abuse. Given their limitation they are not usually welcomed due to the word being for a specific few that see themselves as more important than anyone that may look different or need something different from what they see important. For the most part they live in poverty, in rural areas, have no transportation and no infrastructure in which to mobilize. Even if they get to town they can’t access most public places or spaces. I am mentioning mobility issues in the conversation because if we build for mobility needs than we will include the entire community other than minor accommodation.
- A woman in the group spoke to a personal issues around education and health issues both examples are excellent if we needed case studies as to what not to do and how to fix the institutional, public and community deliveries of service as well as what policies need to be in place to secure consideration in persons with disabilities to contribute to the overall health and well being of their community in a paid or unpaid capacity.
- It is also important to note that current public policy does not support inclusion, in fact, it supports exclusion.

- New Brunswick is doing good work with the Community Living and a respect model in the school system – both need to be followed up.
- We also came up with a process of change. ***** our language depicts our attitudes; our attitudes guide our behaviour; and our behaviour reflects our public policy.
- Advocacy is a huge issue within this community

Report #7

How do we connect our work across sectors and provinces and country to add to the big picture and develop strategies at the provincial and national levels?

Host: Linda Snyder

Participants: Anthony Knight, Margie Macdonald, Jane Warren

Highlights of Discussion:

- some of the issues, for example support for brain injuries support organizations belong in federal jurisdiction
- could have more questions on census that would create a broader database, added information;
- there are no current structures in eastern Canada that have a role for social development and planning X could use existing networks and mechanisms that cross sectors and provinces, for example Federal Council, CHPNA, ACOA, APEC, Maritime and Atlantic Premiers' Councils – and get on their agendas X identify allies in each group that you approach
- need collaboration to collect, share information and have greater impact
- convince people of advantages of working regionally
- collaboration and consultation are over-used words
- need ways to synthesize and analyze our work and results
- need a forum to share ideas and foster collaboration

Action Recommended:

Short term action:

- Find organizations and networks that can provide a clearinghouse capacity.
- Find resources – in kind, funds, capacity – to help connect provincially and regionally.
- Identify networks of organizations that can cover the region.

Longer term action:

- Help build social planning council capacity in Atlantic Canada
- Meet with some of the staff from the Atlantic Premiers' Council; build relationship;
- Help create a forum for social planning and development in region; use our model of collaboration.

Report #8:**Building Support Within Government**

Host: Jane Oram

Participants:

Janet Thompson, Kathy Coffin

Highlights of Discussion:

- Social and economic inclusion is not the dominant framework within government. There may not be a safe environment to discuss or debate these concepts. The interest in them may be very superficial.
 - There are no communities of support for those working within government on these issues.
 - Inclusion defines a way of working. Process is key. These concepts mean a shift within government – in culture, in skills, etc. Government workers need to develop new skills to engage in this work, to work in partnerships, to handle conflict, to connect with the community and engage them in the policy development process.
 - We need to be very strategic in finding allies at all levels of government – bridge people.
 - These bridge people need opportunities to get together to further their own analysis of these concepts and to work collaboratively to develop strategies to use these concepts in their work.
 - We also need to find ways to educate senior management on these concepts – the changes required in policy and in the policy development process means their commitment is key.
-

Report #9:

How do community, Bureaucratic and political realities affect social inclusion?

Host: Bobbie Boland

Participants: Fiona Chin-Yee, Joyce Hancock, Moyra Buchan, Tim Turner, Monica Chaperlin, Julie Oliver, Harriet McCready, Sandra Bentley, Jan Catano

Highlights of Discussion:

- Social Inclusion is about an attitudinal shift.
- While political/bureaucratic commitment may be made for social inclusion (SI):
 - Times of crisis and stress they return to the silos (Eg Strategic Social Plan in Newfoundland and Labrador)
- Commitment to regional steering committees – but health forums led by Minister or budget affect policies
- We are dealing with exclusion dynamics all the time – and needing to do that with structures that are fundamentally exclusive (power based)
- Cross sectoral work is important but difficult - acknowledge it
- Often a disconnect between agendas with governments, departments, communities etc.

Action Recommended:

- Need to practice social inclusion, create concrete opportunities
- Ask questions, let the questions teach and uncover
- Important to approach this work without judgement
- In the long run, expect the language and intent of SI to be co-opted. Prepare to hold fast to fundamental value of just and equitable society.
- Acknowledge this dis-connect; strive for model coherency, call it when it's not there.
- Need time to learn, need to make efforts to help people learn and do more to get buy-in
- Be able to explain and describe what SI looks like in X, Y, Z. Struggle to understand how each system works – except there will be a need to reframe SI so it can be understood in X, Y, X contexts. X Jump on negative issues and build on it as an opportunity, (example youth crime...)
- Spread the word that poverty is bad for business / what is good for community is good for business.
- Remind policy makers of commitments; call for accountability.
- Patience is golden; use opportunities that arise, surf the waves as they roll, expect to have to paddle against the current some of the time
- Everything you need to know you learned in kindergarten. Hold to the contextual values, communication is important, decision making needs to include those affected.

Report #10:

Developing an Inclusion Lens

Host: Malcolm Shookner

Participants: Harriet McCready, Stella Lord, Sandy Bentley, Moyra Buchan, Patty Williams, Susan LeFort, Maureen O'Connell, Fiona Chin-Yee, Linda Goggin, Jane Oram, Carol Amaratunga, Marie Corinne Bourque, Michael Rushe, Phil Warren, Bobbie Boland, Tracey Williams, Anne Marie Maloney, Joyce Hancock, Yvonne Atwell, Cathy Wright, Tim Turner, Lucinda Montizambert, Roxanne RJacob, Judy Hughes, Brenda Murphy.

Highlights of Discussion:

Concerns expressed about developing yet another lens, should learn from the experience with other lenses, i.e. gender, rural:

- a lens needs a process, value base, and philosophy to provide context for using it
- what would it be used for?
- what is the relationship of the inclusion lens with other lenses?
- is there political will to support the use of this tool?
- how do we operationalize the language and experiences of exclusion?
- lens should change the way people perceive issues
- needs to be used in all areas that affect the determinants of health
- has to be a versatile tool that can be used by a variety of people in different settings
- help people to see things differently, analysis leading to understanding
- why should this type of lens be used? Incentives needed for using it
- vision, courage and risk lead to changes in society, not lenses
- need to acknowledge fears related to failure with previous lenses, tools

Suggestions about design and use of an inclusion lens:

- should be designed for use in a variety of settings, not just in government
- public education would be an important application
- should point to clarity of outcomes
- a way to distill thinking about complex problems, help others to understand, make it more real
- should focus on root causes of problems of poverty, discrimination, exclusion
- use current examples to demonstrate value of the tool
- provide a critical perspective on problems, i.e. poverty, oppression
- lens needs to provide direction toward the remedy for the problems of exclusion, to be able to learn from mistakes, point to choices
- show relationship between frameworks of gender, population health, exclusion/inclusion to create solidarity among excluded groups
- visual image of a lens would be useful for understanding how to use it
- lens needs to be useable by people most affected by exclusion
- tool needs to build capacity, optimize benefit of collective resources

Action Recommended:

- tool should be developed with input from those who would use it
 - inclusion in the process of developing the lens needs support and resources
 - Health Canada and HRDC should use the same lens, along with other federal departments.
 - policy makers should be invited to use the lens to analyze how their policies are exclusionary
-

Report #11:

Engaging the business community as champions of social inclusion

Host: Mary Simpson

Participants: Patricia Rustad, Linda Goggin, Jan Catano

Highlights of Discussion:

The business community influences the media, policy makers, and public opinion. If the business community understands that social inclusion is good for business, the movement has an important ally.

Challenges in educating the business community:

Any approach will require vast education. There will be a lot of tilling to make ground fertile for seeds of new ideas. For example, the Business Community Anti-Poverty Initiative (BCAPI) in Saint John spent a great deal of time educating interested business people about poverty before they started to make the connections. But once they got it, they became a powerful force for addressing local poverty issues.

Big business does not participate in local community issues. Smaller businesses are stressed and consider themselves “impoverished”, trying to survive in challenging economic times. Bottom line is that corporate funders do not make significant monetary contributions to the non profit sector.

In the Maritimes, there is a traditional lack of will to change. This also applies to the business community, which struggles to keep up with global trends and competition.

September 11th: Is the global economic community going to realize the series of linkages between global market forces, the dogma of globalization, exclusion, and terrorism? For example, why is the U.S. not throwing all of its brain and economic power behind the development of alternative energy sources; addressing terrorism, global exclusion and alienation, reliance on Middle East oil, and the green house effect all in one strategic initiative?

Action Recommended:

Point out the benefits of social inclusion to the business community.

Bring this abstract concept to life by describing the linkages of impacts. Racism. Exclusion of elders from work force. Alienation of young will lead to shortage of managers. The complexity of these issues needs to be painted so that the costs of exclusion are explicit and understood.

Interest the business press and business reporters in this issue. Talk to David Holt at Atlantic Progress, the Chamber of Commerce magazine. Make arguments why they should cover social policy issues, exploring the connection between social issues and their impacts on business success. Provide them with info kits and contacts.

We need to reverse the typical dialectic. “Businesses pay for generous social policies and programs.” We need to show how businesses will pay more in the long run for unwise social programs and policies.

We need to advocate for longer-term business planning. Short-term profit seeking destabilizes society AND the economy. Point out how European business planning looks much farther ahead than North America. Point out how short term business thinking is bad for society, the economy, and shareholders. Business leaders have to be shown how to get beyond their short term interests in order to see the benefits of longer stable business cycles.

We need to support businesses and promote those who do their part to make a contribution to the local community and social issues. Good corporate citizenship needs to be recognised and supported. Bottom line is that good corporate citizenship needs to translate into sales.

In this economy, where established local businesses are having a hard time competing with the larger, impersonal box stores, dot com retailing, etc., businesses need to demonstrate to the community how they are part of the community, how they are contributing to the community, then clientele will think twice about taking their business outside the community. Shoppers are more likely to be faithful to businesses that are faithful to the community. Local business community needs to demonstrate pro-active leadership in their interest in community social affairs.

Show how the local economy’s health is directly linked to healthy social issues.

Study the Business Community Anti-Poverty Initiative case study and transfer those learnings to other communities.

Go to the Downtown Business associations, Atlantic Chamber of Commerce, and other business organizations with an education kit and one-on-one contact. Many local Chambers of Commerce are interested in the connection between business, community, and social issues. Greater Moncton has already done work on social indicators. They may be ripe to learn about this work and incorporate it into their programming and projects. Need to gauge where business community is at.

Articulate these issues in a way that business understands. Demonstrate knowledge of business concerns and basic principles. Demonstrate linkages.

Report #12:

What do we need to do to popularize the concept of inclusion with the general public?

Host: Jan Catano

Participants: Cathy Coffin, Auréa Cormier, Martine Godbout, Mary Simpson, Twila Day, Julie Oliver, Colin Holloway, Dana Spurrell

Highlights of Discussion:

- Popularizing the concept of social and economic inclusion isn't limited to the general public – it's needed for business and government as well. The goal is to aim for a common understanding of the meaning for the terms being used.
- We need to find a way to make the links between individual action and social policy clear and concrete.
- Abstract concepts and language of social/economic inclusion/exclusion will need to be put into concrete terms, e.g., "room for everyone".
- Language will depend on who is being addressed – target of message needs to be acknowledged with familiar language.
- Too much lip service is being paid to idea of inclusion – too little real action.
- There is a need to move the health discourse away from the focus on hospitals and medicine and on to the broader, more inclusive context of "I will be healthier if I am an active participant in my community."
- The experience of integrating persons with disabilities into communities is relevant to broader issues of inclusion. Inclusion is a step-by-step process in which people are educated about the benefits of inclusion and gradually learn to see inclusion as more than "something nice" that they do.
- We are all excluders at some level, consciously or unconsciously.
- Inclusion is a societal issue and popularizing the concept will require removing the focus from the individual as excluder (or as needing to be included) and focus more on how political and policy structures combine to exclude. Education without eliciting defensiveness can be very difficult.
- One critical aspect of bringing the concept of inclusion to a broader audience is to find a way to help individuals make connections between their actions and the impacts they can have on their own and other's community. For example, voting for a candidate who advocates social cutbacks can result in more panhandlers on the streets of your community.

- One approach could be to change the direction of the approach – i.e., to stop endlessly analyzing and studying the problem and focus instead on what works. Focus on what people want to take on rather than drowning them under the weight of problems. This includes looking at why some initiatives have been successful – what are the common threads.
- Literacy level has an impact – it dictates the level at which discussion can be effective and is intimately linked with poverty and health.
- Making people feel welcome is an essential first step toward inclusion and one-to-one effort and interaction is key to this. Recognition of the need to make people feel welcome – in programs and in discussions – needs to be part of the development of processes and programs.
- Inclusion means going to where people are and not just bringing a few more “Outsiders” into an on-going process.
- Policies don’t always support community needs and the community can be limited in terms of what it can support unaided. This means that it’s important that communities be involved in policy development and for this to happen, ideas of inclusion need to be more widely understood and supported.
- We need a serious effort to use concrete examples to link government policies to their impacts and to make the connections between literacy, poverty, housing, health, etc. We need to be clearer about how policies in one area impact on other areas and policies need to mesh. Public support will facilitate this.
- We need to keep talking about the issue publicly, to anyone who will listen and keep using words until we find the right ones – the ones that will make the issue click for the listeners.
- One approach to building political support is to use a program similar to the Canadian Medical Association’s MD/MP Program which matches every member of parliament with a physician in his/her riding. The MD develops a relationship with the MP and keeps him/her up to date on health issues and specifically, the CMA/s views on these issues. Could we do something similar as a way to keep social inclusion on the minds of politicians over the long term?
- Another strategy is to focus on building supportive communities as a context in which the issues of inclusion can be addressed.
- Finally, tell politicians that inclusion is not only good POLICY, it’s also good POLITICS.

Report #13:

How to reach out to those who fall between the cracks and how to empower them

Host: Auréa Cormier

Participants: Margie Macdonald, Martine Godbout, Dana Spurrell

Highlights of Discussion:

- One way of surveying for people who fall between the cracks could be to find a small group of people and ask them to go out in pairs to walk the streets in the targeted community. These “surveyors” could note what they see and hear and thus identify the people who are excluded. Later, these people could gather some representatives of the marginalised group, have them exchange and identify their own priorities. When attempting to reach out to the marginalised, it is very important to stress the positive we see in them. This is key to empowering them.
- It is important that we reinforce the people who are committed to act toward the inclusion of people. In reality, everyone is capable of acting as an inclusion agent if encouraged to do so and if approached from a positive angle.
- We have come across people, some of whom work for the civil service, who make it difficult to include people in various activities. Those of us who are committed to bringing about inclusion have to work “around” them, a task which is sometimes difficult.
- In Newfoundland, a province-wide project has been put in place to shift more decision making power toward communities. The province was divided into six regional groups and meetings were organized to regroup major community stakeholders. Groups initially had 20 or more people. It took a while for participants to move away from their own agenda but after awhile, some of the regional groups were able to form a consensus and identify the ONE PRIORITY. This was considered to be a significant achievement, given that **process** is a critical component of this type of activity. It was observed that the six Newfoundland groups behaved differently and wanted to set their own priorities. Local groups have to be allowed to work at their own pace.

Action Recommended:

In a gathering like this one, it is very beneficial to have more sharing of personal stories.

Report #14:

Food Insecurity:

How to engage the key players in the dialogue on developing healthy public policy to build food security

Host: Patty Williams

Participants: Colin Holloway, Jane Warren, Katherine Reed, Georgia McNeil, Marie Corrine Bourque, Patty Williams

Highlights of Discussion:

- Poverty and food insecurity is an impediment to most other determinants of health. Food insecurity is not just an issue of access to food – complex multilevel problem (issue of housing, transportation – these expenses are fixed so food is the one to go)
- NS social assistance rates are inadequate – no increase since NS Nutrition Council Report in 1988 (with exception of possible increase of ~\$3 in 1993 – this may have been cut back in other areas) – hasn't kept pace with cost of living; currently food allowance is ~\$126/month (minus phone bill) for a single person.
- Minimum wage is inadequate – needs to be included in the policy analysis
- Availability of nutritious foods is also an issue in many areas
- Safety of food supply and global food distribution system is also a huge concern for people.
- In Newfoundland, the agriculture community has met with the big food chains – one outcome has been farmers and producers have banded together as a distribution co-op to address big business need for a year round food supply; can also pose to big business the question of if no one has money, who will buy the food; also aim for local solutions.
- There is a disconnection – need education (consciousness-raising approaches) to address healthy eating (for everyone, not just a problem of the “poor”); lost cooking skills; societal expectations re: material goods that take away from money for food.
- Need safe environments for education – family resource centres key; computers for school age children –
- depends on target group

Action Recommended:

- Use evidence on cost of a healthy diet in relation to income (i.e. social assistance, minimum wage) to advocate for changes in policy.

- Engage business community, government – including opposition parties (i.e. Department of Community Services, Department of Health, Senate Standing Committee on Health Care) and community (through Family Resource Centres) – use of discussion papers and key initial partners; involve them early on; meet individually to get them to the table.
- Use of argument that food insecurity violates most of the determinants of health and Right to Food (UN Covenant on Social, Cultural and Economic Rights?).
- Create safe environments for education and consciousness raising so as not to marginalize participants.
- Concern is out there so start with dialogue, plan and commitment but don't expect too much – recognize that lasting change is a long process.

Report #15

Youth Exclusion to Inclusion

Host: Rose Stewart et al.

Participants: Vanessa Mercer-Oldford, Roxanne RJacob, Anthony Knight, Monica Chaperlin, Lucinda Montizambert

Highlights of Discussion:

- Youth in Chipman, NB who are sentenced to mandatory community service through restorative justice programming are mentored by a local carpenter who gives the youth skills at his work site. The carpenter does this as a volunteer. The carpenter also leads a youth group in the community where the youth go every Thursday night. These same youth were the ones who were being suspended and were failing out of school. Now, these youth make his youth group (42 youth attend in a community of 2,000 people) and it has become a mainstay in the community.
- Schools are overwhelmed by the challenges of dealing with youth with behavioural problems who are not supported at home. These youth are being expelled and are not being given the opportunity to attend alternative education sites in a nearby community.
- Turf wars among school district administrators, teachers, community leaders and parents work are a disservice to the youth.
- ***Model for Coordination of Services for Children and Youth*** (Province of Newfoundland Government)
 - Unique to Atlantic Canada
 - Departments of Justice, Education, Health and Community Services, Human Resources & Employment – works in collaboration – (involves the parent(s) and the child every step of the way) and focuses on the individual child in an effort to prevent the child from having problems later in life.
 - Barriers created by confidentiality laws have been addressed to allow for sharing and collaboration – an information sharing protocol has been developed.
 - initiated by the “***Classroom Issues Report***”
- We need to not only help youth who’ve committed crimes but work to ***prevent*** youth from making such choices.
- In Newfoundland, youth are able to access government services up until they reach the age of majority (18). In the Maritimes, youth up to the age of 16 are able to access government services. The age of majority is 18. However, from the day the youth becomes 16 years old and 1 day to until the day they turn
- 18, they are unable to access government services if they have not been serviced by the department responsible for social services.

Action Recommended:

We had a general discussion surrounding best practices and the group agreed unanimously that these were best practices to be promoted.

Report #16:

How can we influence public policy to introduce the community health centre model as a means to provide inclusive/holistic primary health services and supports in communities?

Host: Monica Chaperlin

Participants: Sharon Davis-Murdoch, Patricia Rustad, Vanessa Mercer-Oldford, Twila Day

Highlights of Discussion:

Key Questions were addressed:

- What is a community health centre (CHC)?
 - one stop primary health services provided by an interdisciplinary, salaried health team, for a defined community (by geography, population group) and governed by community.
- Tell us about the Saint John Community Health Centre?
 - visit the Atlantic Health Sciences Corporation website for more information www.ahsc.health.nb.ca (and go to the section about the SJCHC)
- How is the CHC model inclusive?
 - person-centred – services operate collaboratively to enable individuals, families, groups and community as a whole to increase control over their health and well-being
 - focus on addressing determinants of health/root causes and solutions; health promotion and community development processes are integral to CHC operations
 - community guides the services of a CHC (not government or doctors)
 - medical care becomes only one piece of the health needs of an individual
 - CHCs are well linked to other health-enhancing services like employment, education, justice, recreation, etc.
 - CHCs use the resources of the community to address health and well-being
- How does a CHC meet the needs of the population?
 - person/family/community decides their need/issue and CHC serves to assist individuals/groups access the information, tools, expertise and supports they need.
- How can we encourage the development of collaborative centres like CHCs?
Saint John, N.B. example:
Issue: Shortage of family physicians; government and physicians at odds; communities frightened

Community Response: Formation of Greater Saint John Roundtable on Primary Health Care – multistakeholder group – chaired by the mayors of the 4 local municipalities and involving Board of Trade Chair and Past Chair, senior representatives from key businesses (N.B. Tel; Irving), hospital corporation, local MLAs, community service leaders, family physicians)

- Results: Entire community leadership researched the problem and is advocating for primary health care collaborative models (CHCs) as the right approach to support community health and sustain our health care system

Action Recommended:

We need to find ways to engage community leaders from all three sectors (business, government and community) to work at the community level and to come together around one table to address key issues. (like shortage of family physicians, poverty, etc). It works! Learning together leads to wonderful solutions and builds so much more power to make the changes we need to make.

Report #17:

Supporting Single Parents through Support for their Families

Host: Harriet McCready

Participants: Anne Marie Maloney, Stella Lord, Twila Day, Sharon Davis-Murdoch, Deborah Kiceniuk

Highlights of Discussion:

The original intent of this topic was to explore strategies to support families so they can support their young sons and daughters who become single parents. The topic quite naturally went beyond this, though most of the bullets can be interpreted both from a perspective of addressing single parents themselves, and also the ability of their parents to support and assist them.

- Consider support for single parents and their children as an investment in future society
- Incentives for families to support/assist their young single parents (financial plus social, etc.)
- Need to value both parents and support roles for fathers
- Remove punitive policies (eg: denying social assistance based on unwed father visits)
- Remove value judgements from policy decisions
- Re-examine principles behind current policies
- Re-examine objectives of current policies (are they being met?)
- Consider policies that support choices (eg, in education, loans plus grants)
- Ensuring minimum Gr. 12 education available (including child support)
- Need to integrate programs from all sectors (ie Canada Student Loan, income support, education, justice and training and employment)
- Resources to be used as clients need them not based on system needs
- Ensure nutritional needs are met (not currently the case)
- Provide life skills supports (household management, cooking, etc)
- Support for community-based organizations (community care in NB addresses housing needs)
- Act on available research around single parents
- Ensure case workers are pro-active rather than reactive in maximizing supports for their clients

Additional Thoughts for further exploration:

NS has the highest percentage of single parents in Canada

What prevents upstream investment in single parents and their children?

Report #18

Racism – What is it?

Host: Yvonne Atwell

Participants: Michael Rushe, Rose Brooks, Mary Simpson, Sharon Davis-Murdoch, Rose Stewart, Lucinda Montizambert, Roxanne RJacob, Carol Amaratunga

Highlights of Discussion:

- quiet discrimination – language barriers, differing cultures
- invisibility of people of colour in province of NS and NB
- need to build a connection to the Black communities
- what it means to be a minority in a community with the majority, where the majority is white
- racism is political power and decision-making power and not being invited to the table because of that power – not just including, but involving
- concept of diversity – people who have not had experience as a minority cannot determine the needs of the minority
- fear of the discussion around racism – people don't want to challenge their own racism
- racism makes you FEEL something when you experience it
- feelings of guilt around whether one has the knowledge or the education to speak
- the only minority living in a community – sometimes different experiences based on different “colour” of skin
- moving from social exclusion to social inclusion through policy, programs and activities
- mechanism to identify ways from taking it from the abstract to the personal
- educate the people who are in the decision-making roles – have discussion within the organization
- what can we do to make inclusion meaningful and a worthwhile activity
- minority needs to empower themselves – need to get their issues heard
- making linkages from the top – what kind of approach would you use
- keeping the people involved who come to the table, and bringing more people in
- discussion in open forum around global power structures need to include minorities/diversity
- membership - strategies to move people from exclusion to inclusion – involve them in the process
- utilize those who have experience in the process

- definition – racism is a well-organized global system that is designed to oppress people of colour and other ethnic groups for the survival of the ten percent (ie 90 percent of the planet is comprised of people of colour, 10 percent comprised of people who classify themselves as white) - this behaviour is played out on a conscious and subconscious level

Action Recommended:

- finding a way to take racism from the abstract to the personal
- self education
- social inclusion – What does it mean? Integration? Assimilation? Membership? Acceptance?

Resources Required:

- Atlantic Canada must change in order to be economically sustained – must go back to resources
- trust factor – of leaders by leaders, to the community from the community

Report #19: Brain Injury

Host: Jane Warren

Highlights of Discussion:

This country lacks a system – an infrastructure – that provides, manages, and monitors services to individuals with traumatic brain injury.

The magnitude of the problems suffered by brain injury survivors is ignored by most of the provinces in this country. The difficulty is brain injury not being recognized as a distinct disability. Many different factors can lead to brain injury. It can result from a traumatic incident or can be acquired as a result of another medical event, such as stroke, aneurysm, tumour, anoxia, infection, etc.

Survivors of TBI (traumatic brain injury) often have trouble remembering, concentrating, making decisions, and controlling impulses. They can also suffer serious motor, sensory, and emotional impairments that can change education and career goals, and also affect relationships with family and friends. But not all TBI-related disabilities are readily apparent to others. That's why TBI has been called "the invisible epidemic" . . . an invisible epidemic despite the large numbers of survivors in the Canadian population.

The Ontario Brain Injury Association used 1996 census data to estimate the annual total number of traumatic brain injuries in Canada as 45,589. Which are more people _ in that one year _ than the number of Canadians who were killed in all of World War Two.

As brain injury is a disability experienced by so many Canadians, it is vital that federal moneys be spent on treatment and rehabilitation of survivors. There is a need in Canada for a clearly defined continuum of care for brain injury survivors and their families, ranging from acute care to case management and post_rehab services. That is, the care that is needed for as long as it is required. For many survivors, that will be for the rest of their lives. Respite care for families and caregivers is also needed.

A clear _ federal _ definition of the continuum of care would expose gaps in each province's health care system.

In some provinces, brain injury is not even classified as a separate disability. This lack of recognition relates in part to our system's inability to track the necessary data. Since so many other health conditions directly result from brain injury, it is difficult for the system to recognize the magnitude of the problem.

In Nova Scotia for example, the brain injured are classified as, and grouped with, either the mentally ill or the mentally challenged. No appropriate rehabilitation is available under either of these categories for survivors _ because treatments and medications for these classifications do not address the unique needs of the survivors – their actions, behaviours and abilities. Brain injured survivors are faced with an inadequate system which forces them into health systems designed for other populations. As a result they are warehoused in group homes for the mentally challenged, mental institutions, nursing homes and often in jails with no appropriate rehabilitation.

A separate classification for brain injured people would contain about 2,200 new adult members per year in Nova Scotia, and more than 350 children, according to studies done in 1999/2000. (I don't know if similar studies have been done lately in other provinces.)

There is no "cure" for a brain injury, but with proper support, a large number of survivors can become productive members of society again. Thus lessening the burden on the social service system and the law enforcement, legal and penal systems. This support, and programs for behaviour, literacy, memory and cognitive modification are limited in availability in all provinces. This is where federal money could come into play.

A database of the number of brain injured survivors could be obtained from questions on the federal census, or from Statistics Canada. This data gathering would also help locate people who have sustained brain injuries in the past, lead to an assessment of their needs, and help in the provision of services to improve their quality of life.

And how effective that can be! It has been shown that survivors can go from being institutionalized to being productive members of society. This does not happen very often, because of lack of money for rehabilitation and constructive learning programs. Federal money could help here.

TBI data can also be used to educate the population and policymakers about brain injury, to develop and target prevention programs, to improve injury_prevention legislation, and to deliver better services to survivors.

Hospitals could be required to record those who come in with actual or suspected brain injuries. It should be noted that many brain injuries go undiagnosed until long after the event that brought people to our health care facilities in the first place. Medical schools should be required to devote more hours of class time to the study of traumatic and acquired brain injuries.

Federal money could help to make visible the magnitude and scope of traumatic brain injury among Canadians, with information to the general public and to the various levels of government. This information would enable governments, at all levels, to make the best use of resources to prevent brain injuries and to more effectively treat those that do occur. Legislation would require them to do so.

Survivors of brain injury receive less appropriate treatment for their disability than do other disabled groups. This unquestionably contravenes the Charter of Rights and Freedoms. Which is a federal responsibility.

Australia has _ federally _ recognized acquired brain injury as a disability, and the United States has had a TBI (traumatic brain injury) Bill since 1996.

There are provincial brain injury associations in every province. As first movers in the area of brain injury survivors support, they are well placed to head a more formal movement _ "more formal" meaning "stable, federal funding". This funding would lead to a change in strategies for these, mainly volunteer, associations. More energy and

resources could be spent on education and prevention, without having to worry about fundraisers to cover the basic cost of such things as photocopying, transportation, meeting announcements, etc..

Traumatic brain injury is the leading killer and disabler of Canadians under the age of 44. Because of its epidemic numbers it should become a federal priority.