



Creating Connections

Final Report - Section III

Central Region



Central Region Working Group - Children and Youth

Participants: Twelve

Question 1: What are the possibilities?

Excited that recreation is the focus

- Important to recognize the realities of working with Non-profits.
- Recognition of benefits.
- Recreation/Leisure - Opens up communication - reduces stigma.

Develop increased knowledge/awareness of regional and provincial services

- Good to see the good work that is going on around HRM and Province.
- Opportunities to network and partner to assist in training to support each other.
- Gaining a better understanding of the depth and scope of service provided by non-profits.



Develop partnerships and connections

- Keeping connected is important moving forward.
 - Promoting each other.
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- Connect between resources.
 - Tour, experience facilities and services.
 - Makes more accessible across facilities.

Recognize and promote diversity of opportunities for recreation/leisure

- Not everybody wants to recreate in a facility.
 - Competitive sport can be overwhelming and cause of anxiety.
 - Fun focus - silliness.
 - Free play field day.
 - Arts may fill that need.
 - Brain focus can open doors... not just the body.
 - Physical activity has a role.
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- Youth are diverse and should not be categorized into sport.

Remove barriers (including stigma) to participation.

- Need gender neutral facilities.
- Not accessible to LGBTQI right now.
- Ways to improve accessibility.
- Accessibility is not just the building but the culture as well.

Youth want opportunity to guide own programming

- Want access to equipment - and hang out.
 - Still gain benefit.
 - Youth want to hang out.
 - Program based on 'Nothing'.
 - No adults, volunteers...etc. "Trust the youth".
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FUNN: Functional understanding not necessary

- Having fun for the sake of fun...no structure.

Question 2: What are the priorities for next steps in the Central region?

Keep collaboration going!*

- Meetings, email, network supports.
- Use each other as a resource...actively.

* Note: Point identified by the group as priority next step.



Collaborate now...don't wait for the \$\$*

- Working together to make most of resources.
 - Same team ...Collaborate on funding.
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- Connecting Laing, Phoenix, Youth project.
 - A lot of overlap already... serving same opportunities.
 - Learn from each other's strengths.
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- Social and structural support for organizations and its members.

Sharing resources is so important!*

- Bayers Rd. facility - not connecting with other facilities that may be able to provide further assistance.
 - Healthy Minds is networking well... directing people towards resources.
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- Central core is pretty well covered.
 - Outside of core...harder to be aware... harder to get there.
 - A lot of kids who are not already being served.
 - Community providers are dealing with the kids not being served.
 - Not always possible to direct them.
 - Don't have tools .
 - Staff have to take initiative.

* Note: Point identified by the group as priority next step.

Community recreation wants to act appropriately - best practices*

- Need to draw on RT's and their education and research background.
- Not as much experience: Flying by the seat of your pants...



- Community has own expertise.
 - RT's need to hear from all the players to build capacity...build resources.
 - HRM and community resources have 'dead space' that can be better utilized.
 - Training of recreation staff is a key.
 - Mental Health First-Aid.
 - Outreach
- Kids have own expertise
 - Create better programs across the board.
 - Share resources.
 - Schedule in programs such as ACT, and other community based RT.
 - Mental Health First-Aid is a key resource.
 - Functional Knowledge.
 - Bring in Youth Speak.
 - Great opportunity to network.
 - SAFE TALK...where to turn if you don't have the expertise...
 - Get family and kids to help shape programs, shape what grants are sought out...meet the needs.
 - Make the planning relevant & authentic.
 - Community educators can help break down stigma...open up resources.
 - One and a half hour sessions.

* Note: Point identified by the group as priority next step.



Question 3: What are the possible collaboration/partnerships and action steps for moving forward?

- Outline how that connection, network will happen.
 - Social Network resources maybe a good way to do it.
 - Reconnect in the next 4 weeks.
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- HRM is setting up now, wants to connect now.
 - 211: Make sure your info is correct and up to date.
 - Provide programs that meets the needs and abilities of the client.
- Creating a data-base of services... search your specifics, and opportunities will be offered...online resource... extend into the province.
 - HRM directory.
 - Change the database to be inclusive.
 - If we don't do that we are doing it wrong.
 - Empower ourselves to help us empower the youth.
 - Can't be everything to everybody...but can better use partners.
 - Policies sometimes do allow for youth to be in the 'right place'.
 - Collaborations are happening now...in beginning small steps.

Section III

Sum-Up*

- Collaboration.
- Stay connected.
- Share resources.
- Share knowledge.
- Share successful collaborations.
- Avoid competing against each other, make sure we collaborate and are not fighting for the same grant money.

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- Collaboration is not hard...
 - Partnership greases wheels.
 - Money can break own partnerships when running out of funds.
 - Partnership cannot be viewed as filling a \$\$ need.
 - Must be mutual benefit.
 - Kids move around... participation up/down... move resources where needed to support.

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- Let the collaborations grow organically, but make an effort for once/twice a year...

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- facebook is not a good resource to use!! Organizations block most social media sites.
 - Can be a place for social media.
 - Must be used properly...
 - Email is more feasible...
 - Bi-annual meeting of organizations... gives time to collaboration.
 - Fall & Spring meetings.
 - Works with programming schedule for organizations.

* Note: Point identified by the group as priority next step.

Section III

Central Region Working Group - Adults



Participants: Fifteen

Question 1: What are the possibilities?

Developing new partnerships with focus on:

- Decreasing stigma.
- Increasing education around mental health.
- Developing new opportunities with clients - providing better support for individuals in the community.
- Collaborate with everyone in the community.

Focus on strengthening community supports through networking and education:

- Better support people working in the community and people working in the community can better support clinical work - both sides coming together to collaborate, partner, support one another - support through everyone in connection with mental health.
- Increasing education - everyone has different skills sets and share knowledge/experiences in order to grow/collaborate.

Emphasize the health and well-being benefits of recreation/fun

- Recreation/fun is not looked at as important (more 'fluff').
- We don't market our recreation profession well enough.

Emphasize...

- Promote mental wellness at work: “Practice what we preach”.
 - Creative positive workplace culture (“we don’t always have a lot of fun at work”), e.g., commit to having at least one fun thing at work.
 - When you don’t want to go to work, how can you help others? Having fun at work generates a better type of energy and atmosphere which promotes better mental health.
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Peer mentors/support key to promoting and supporting participation

- Often a disconnect with people saying this is a good idea but the individual getting out there and having to do all the motivation and coping themselves.
 - Need for someone go out with individuals to help with the transition: who would this be? Peer support .
 - “Very hard to go on my own” - knowing people is a gap - having a little bit of support leads to a lot.
 - Peer support needs to happen doesn’t matter who does it*.
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- Sustaining the supports to build habits
 - Building trust in a one-on-one position. - not just one time, takes several weeks.
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- Shared experiences is important – doesn’t matter who it is, they just want someone there understanding if something is going on with the individual, someone is there.
- Lots of mentorship models currently exist: recreation skills to make programs.

Promoting awareness of community resources and opportunities

- Marketing possibility and priority*
 - Giving life to do your life.
- We have opportunities for sports within the hospital for people in the community but knowledge isn’t out there to market and to invite individuals in. Hoping individuals who have been there and left come back and be that peer support.
- Potential participants are more comfortable having someone to contact.

* Note: Point identified by the group as priority next step.

Building partnerships, connections, capacity with community/health partners

- Opportunities - no community rec position sitting at this table.
 - Education of community recreation is needed: they say their policy is inclusion but perception is that they don't believe it/understand it.
 - Mental health first aid course good for people without background knowledge.
 - Staff who don't have a background can be intimidated and don't know what to do with individuals that come through the door.
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- Is there a way we could normalize the presentation of information.
 - E.g., Partnership with our facility (hospital).
 - Not just talking to people, talking to managers, people at higher level.



- How do we coordinate to work together? Collaborate and coordinate something so we know how to move forward.
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- Long term care: try to create linkages but in environment itself, we have a lot of depression and isolation:
 - Need to create linkages in physical environment so the change is not so drastic - staff already know familiar faces and so it's not so scary for individuals to come in.

Question 2: What are the priorities for next steps in the Central region?

- Social networking within health care profession/ community.
- 'Create change' - meet once a month and discuss recreation/art that is going on:
- Long term care: try to create linkages but in environment itself, we have a lot of depression and isolation:
 - What are you doing in the community, how can we help.

Section III

- Youth service provider network: connect through that- managed through HRM:
 - List of mental health groups as well.
- Mental health coalition.
 - Organizations coming together - professional groups coming together including community groups.
 - Every 2 months rec therapy council meeting: lots of great programs going on that we don't always know about... really good idea for community rec people to come in.

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- Knowledge exchange under social networking.
 - “We can connect with anyone here”.

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- We connect better if we go to where individuals physically are instead of emails.
 - Putting our faces out with consumers.

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- How can we get peer supports coming back to be a peer support/volunteer?
 - Other incentives not just money - not having to buy running shoes, not having to pay for gym membership – other incentives – art supplies that they could use, additional education training.

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- Providing education for the front line people.
 - More education means less stigma.
 - If people have confidence then they can use that to attract people, programs, etc. If you're afraid you're not going to be welcoming.
 - Education in the community level of what 'inclusion' is.
 - Mental health orientation*.

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- On a bigger level, having the right people talking: building bridges for immediate resources, but in order to make it more sustainable it needs to be more of a service.
 - Front line staff participating alongside consumers.
 - Partnerships are key.

* Note: Point identified by the group as priority next step.

Question 2...

- Names of all community recs and asking when do you have your meeting and then going in... bringing scenarios in and having a discussion on an experiential thing vs. lecture.
- Great to share ideas but change has to come from the authorities, the decision makers to move forward... a lot of liabilities etc. Less steps when going from the top down vs. down top.
- “Who’s who in the zoo” - making a directory or organizations, people, possibilities, what is available.

Question 3: What are the possible collaboration/partnerships and action steps for moving forward?

- Sharing resources with who we already have with the larger group.
- Connecting recreation therapy bunch with community recreation bunch - could be around mental health, could be everyone.
- Mental illness week in October - involving everyone especially this week - annual thing - “St. Mary’s Boat Club”.
- Maybe having another campaign - wellness**.
- Connections with physical health and mental health.
- Specifically having programs target anxiety.

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- Promote benefits of participation in leisure and recreation.
 - Very different benefits in different recreation, e.g., physical activity helps me eat and sleep better.
 - Singing music different set of benefits helps with anxiety and is an emotional release - all benefits, different ‘recreation’ ‘leisure’.
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- Getting feedback from participants.
- Peer support can help with marketing and selling.
- Thrive Halifax – healthy eating and mental health – emphasis on this - buy in from the very highest level - having support from that level helping us move forward.

People willing to co-lead (re)connecting: Jacqueline Cook, Carol Davis-Jamieson, Cheryl Jeffers-Johnson, Donald Edgar, & Elaine Salisbury