

## Collective Impact Grant OTF Connected Rural Communities

### Lead Organization: How is the organization involved in this initiative? 50 words [=49]

GBACHC initiated the first phase of collective impact. This work involved collecting preliminary Be Well survey data, talking with community members about their experiences, sharing these results, recruiting partners, and hosting collaborative meetings: Community Health and Wellbeing Summit -April 2016, Collective Impact workshop- November 2016 and steering committee meetings.

#### 2015-16

Fall: Be Well Survey collection involving distinct communities of: Grand Bend, Hensall, Zurich, Port Franks, Thedford.

Winter: Community conversations about the results of the Be Well Surveys and ideas for community action to build capacity

Spring: Shared the results of the Survey and Community Consultations at the Community Health and Wellbeing Summit in April to recruit partners. Hosted a Collective Impact presentation at the GBACHC AGM in June

Summer/Fall: Presented the Be Well data and community discussion results to the four area Municipal Councils

#### 2016-17

Fall: Hosted a Collective Impact Workshop with OTF and Tamarack for a cross section of area representatives. Steering Committee created.

Winter: Hosted the Collective Impact Steering Committee meeting in February to share the workshop results and identify key direction

Summer: developed draft funding submission

Fall: Hosted the Collective Impact Steering Committee meeting to finalize key direction and further input to funding submission.

### Support Organizations: How is the organization involved in this initiative? 50 words [=47]

Three area churches, Grand Bend Community Foundation, Huron Shores Transit Committee, Lambton Shores Nature Trails, other health services as well as Municipalities of Lambton Shores, Bluewater and South Huron. Leaders from each of these organizations have agreed to be a part of the core collective impact group.

#### 1. What is the complex systemic issue that you are trying to address? 100 words [=74]

Connected Rural Communities is the issue we are trying to address<sup>1</sup>. This issue involves connecting people through mentoring, volunteering, intergenerational contacts; connecting to services, groups and activities; connecting to environment through trails, nature and gardens; connecting people to safe, affordable housing; and connecting by using active and green transportation<sup>1</sup>. Some key outcomes to achieve through this initiative include “improving mental health and happiness; reducing isolation; as well as improving connections, inclusion and involvement”<sup>2</sup>.

#### 2. Priority Outcome

- Reduce social isolation

**3. Please explain how your initiative aligns with this priority outcome. 100 words [=90]**

This initiative will help to reduce people's experience of social isolation by connecting people to others, groups, activities, housing, and transportation. This initiative will identify and overcome factors that keep people socially isolated as well as identify and establish pathways to become better connected. For example, some people are socially isolated transportation limitations or because they are unaware of programs available. Community members will have a say in the services, activities and groups that are important to them as well as be empowered to contribute in any way they can.

**4. Secondary Priority Outcome**

- Diverse groups work better together to shape community

**Please explain how your initiative aligns with this priority outcome. 100 words [=86]**

Organizations and community groups need to work differently together to ensure people become more connected and less socially isolated. This initiative will support and enhance opportunities to work together in new ways. Several groups are already starting to work together to make improvements in their communities; we need better coordination and collaboration. This initiative will also invite more partners and find or form more groups that are actively improving their communities and bring them to the table to enhance our collective voice and generate desired results.

**6. Provide evidence that demonstrates that the issue is systematic, complex and unresolved. 300 words [=295]**

Local Be Well survey data has shown that this issue remains unresolved<sup>3</sup>. The data revealed about *one out of four* respondents reported their sense of belonging as weak or somewhat weak<sup>3</sup>. Again, *one in four* respondents reported they felt "uncomfortable because of appearance, disability, mental health or other health issues"<sup>3</sup>. Also about *one out of four* respondents reported participating in community activities and groups<sup>3</sup>. About two out of three survey respondents reported that "most people can be trusted", whereas *one of three* reported that they "cannot be too careful in dealing with people"<sup>3</sup>. *Less than half* of respondents (44%) reported having five or more close friends<sup>3</sup>. In GBACHC's recent quality improvement plan report, 63% of respondents reported that relationships affected their stress level the most. Studies show that adults with strong social support are more likely to report the following: a strong sense of belonging to their local communities, their mental health as "very good" or "excellent", being happy as well as having high psychological well-being<sup>4</sup>.

Some factors that contribute to social isolation include living alone, living on low income, health problems including mental health issues, disability, sensory impairment such as hearing loss, and major life events such as loss of a spouse<sup>5,6</sup>. This is not an exhaustive list, but it illustrates the complexity of the system that surrounds this issue. Specifically, the Association of Ontario Health Centre's CIW data identified significant associations between having a "very weak" sense of belonging and low family income as well as having poor or fair mental health and lower family income<sup>5</sup>.

This initiative is also complex as our geographic catchment is mainly rural area includes three unique municipalities in two counties (i.e. municipalities of Lambton Shores, South Huron, and Bluewater in Lambton County and Huron County)<sup>7</sup>.

## 7. Describe the population affected by this issue. (100 words) [=99]

Population affected by this issue includes seniors, youth, people with mental health issues and people living on low income<sup>1,2</sup>. The percentage of the population 65 years of age and older living in this area is higher than Ontario (26.9% vs. 16.7%). Grand Bend's population is oldest. Zurich and Hensall have relatively more youth compared to the rest of the area. The percentage of private households with one person (i.e. people who live alone) is higher in this area compared to Ontario (28.9% vs 26%). Thedford has the highest percentage of lone parent families in the area, followed by Exeter.

**Table 1: Population Summary**

Location	% of population under 20 years of age (0 to 14 + 15 to 19)	% of the population 65 and over	Average / Median Age	% of Private Households by Size w 1 person	% Lone Parent Families
Hensall <sup>a</sup>	180+55/1080 = 21.8%	205/1080 = 19.0%	42.1	150/435=34.5%	35/280 =12.5%
Zurich <sup>b</sup>	175+50/920 = <b>24.5%</b>	170/920 = 18.5%	39.9	125/390 = 32%	35/260 =13.5%
Grand Bend <sup>c</sup>	110+55/2685 = 6.1%	1370/2685 = 51.0%	<b>61.0</b>	480/1455=33%	55/970 =5.7%
Exeter <sup>d</sup>	180+55/1080 = 20.3%	1140/4645 = 24.5%	45.3	690/2010=34%	180/1290 =13.9%
Thedford <sup>e</sup>	120+30/740 = 20.3%	180/740 = 24.3%	45.5	105/310= 34%	45/205 = <b>21.9%</b>
Lambton Shores <sup>f</sup>	1300+435/10635 = 16.3%	3100/10635 =29.1%	49.1 / 54.7	1360/4785 =28.4%	335/3070 =10.9%
Bluewater <sup>g</sup>	985+400/7135 =19.4%	1735/7135 =24.3%	45.8 / 50.4	865/3030 =28.5%	185/2130 =8.9%
South Huron <sup>h</sup>	1530+510/10095 =20.2%	2660/10085 =26.3%	45.9 / 49.6	1265/4250 =29.8%	365/2940 =12.4%
West Coast Shores Area (calculation)	5160/27855 =18.5%	7495/27855 = <b>26.9%</b>	Higher	3490/12065 = <b>28.9%</b>	
Ontario <sup>i</sup>	2207970+811670 /13448495 = <b>22.4%</b>	2251655 / 13448495 = 16.7%	41.0 / 41.3	1341300 /5169170 =26%	644975/ 3782545 =17.0%

Source: Statistics Canada, Census Profiles, 2016

Statistics Canada. (2016a). Census Profile: Hensall. Retrieved from <http://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/details/page.cfm?Lang=E&Geo1=DPL&Code1=350253&Geo2=PR&Code2=35&Data=Count&SearchText=Hensall&SearchType=Begins&SearchPR=01&B1=All&GeoLevel=PR&GeoCode=350253&TABID=1&wbdisable=true>

Statistics Canada. (2016b). Census Profile: Zurich. Retrieved from <http://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/details/page.cfm?Lang=E&Geo1=DPL&Code1=350077&Geo2=PR&Code2=35&Data=Count&SearchText=Zurich&SearchType=Begins&SearchPR=01&B1=All&TABID=1>

Statistics Canada. (2016c). Census Profile: Grand Bend. Retrieved from <http://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/details/page.cfm?Lang=E&Geo1=POPC&Code1=1297&Geo2=PR&Code2=35&Data=Count&SearchText=Grand%20Bend&SearchType=Begins&SearchPR=01&B1=All&GeoLevel=PR&GeoCode=1297&TABID=1>

Statistics Canada. (2016d). Census Profile: Exeter. Retrieved from <http://www12.statcan.ca/census-recensement/2016/dp-pd/prof/details/page.cfm?Lang=E&Geo1=POPC&Code1=0272&Geo2=PR&Code2=35&Data=Count&SearchText=Exeter&SearchType=Begins&SearchPR=01&B1=All&GeoLevel=PR&GeoCode=0272&TABID=1>

Statistics Canada. (2016e). Census Profile: Thedford. Retrieved from <http://www12.statcan.ca/census-recensement/2016/dp-pd/prof/details/page.cfm?Lang=E&Geo1=DPL&Code1=350075&Geo2=PR&Code2=35&Data=Count&SearchText=thedford&SearchType=Begins&SearchPR=01&B1=All&TABID=1>

Statistics Canada. (2016f). Census Profile: Lambton Shores. Retrieved from <http://www12.statcan.ca/census-recensement/2016/dp-pd/prof/details/page.cfm?Lang=E&Geo1=CSD&Code1=3538040&Geo2=CD&Code2=3538&Data=Count&SearchText=lambton%20shores&SearchType=Begins&SearchPR=01&B1=All&TABID=1>

Statistics Canada. (2016g). Census Profile: Bluewater. Retrieved from <http://www12.statcan.ca/census-recensement/2016/dp-pd/prof/details/page.cfm?Lang=E&Geo1=CSD&Code1=3540010&Geo2=CD&Code2=3540&Data=Count&SearchText=bluewater&SearchType=Begins&SearchPR=01&B1=All&TABID=1>

Statistics Canada. (2016h). Census Profile: South Huron. Retrieved from <http://www12.statcan.ca/census-recensement/2016/dp-pd/prof/details/page.cfm?Lang=E&Geo1=CSD&Code1=3540005&Geo2=CD&Code2=3540&Data=Count&SearchText=south%20huron&SearchType=Begins&SearchPR=01&B1=All&TABID=1>

Statistics Canada. (2016i). Census Profile: Ontario. Retrieved from <http://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/details/page.cfm?Lang=E&Geo1=PR&Code1=35&Geo2=PR&Code2=01&Data=Count&SearchText=ontario&SearchType=Begins&SearchPR=01&B1=All&TABID=1>

**8. Explain how the population affected will be involved in this initiative. 100 words [=95]**

The steering committee membership includes some community members. All members of the committee will continue to recruit new members and will establish feedback loops; that is, continue to obtain input from community members and bring this information back to the committee and vice versa<sup>8</sup>. There are also a number of working groups already formed in various smaller communities<sup>9</sup> focusing on specific community initiatives. Community members are involved in and lead these working groups<sup>9</sup>. Various efforts have been and will be made to make participation on the steering committee and working groups as easy as possible<sup>10</sup>.

**9. What are the various sectors you are planning to bring together to address this issue, and why have you picked these ones? 200 words [=154]**

-Municipalities of Lambton Shores, Bluewater, and South Huron because most people in the GBACHC catchment area live in these municipalities<sup>7</sup>.  
-Other health organizations: North Lambton Community Health Centre, Bluewater Family Health Team, Lambton and Huron Health Units and mental health and addiction agencies, South Huron hospital, Kettle and Stoney Point Health Services. Sense of belonging and social inclusion impact health<sup>4</sup>.  
-Others that need to be involved to ensure a systems approach to change are schools, local trail and environment committees, faith organizations, libraries, chamber of commerce and businesses, local transportation agencies (Lambton Elderly Outreach, Easy Ride, etc.); Youth Services and Centres (i.e. Big Brothers, Big Sisters; Youth and Arts Centre); social planning councils, and organizations that focus on sensory impairments or disabilities (i.e. Canadian Institute for the Blind and Community Living), Service groups such as Rotary, Optimists. These organizations either work with those affected by the issue or work in a priority outcome area.

**10. What are some approaches that have previously been attempted to address this complex issue? Why weren't they successful? 300 words (=101)**

Many organizations run groups and activities; however, turn-out is low or declining. We are working in isolation to develop, promote, implement and evaluate these groups and activities.

There is no central information repository providing ease of access to information about the programs that are available.

We have local transportation support agencies; however, rides to medical appointments are prioritized and supersede rides to recreation and social activities. There is no municipally based transportation system to connect people to programs.

The municipality of South Huron has an age-friendly report<sup>11</sup>; however, there are concerns about obtaining the resources to put these recommendations into action.

**11. What new approaches other than yours, are currently being advanced to address this issue? What have they achieved to date? 300 words [=299]**

**Destination Prosperity**<sup>12</sup> is a project initiated by the Poverty 2 Prosperity Coalition in Huron County and funded by grants from OTF and Huron Perth United Way. Huron Park was the first community identified

for the project. Service providers interviewed local women to discover their vision for and concerns in their community. The women identified three areas for development: recreation for adults and children and childcare. A community developer was hired to work with some of the interviewed women. They formed a working group and presented the identified areas to leaders in the community. As a result, the women have organized regular community meetings and recreation activities for the children, networked with municipal leaders, developed partnerships with local agencies, have been offered a free one-year membership with the Lion's Club, participated in training activities, developed a horticulture organization and a Facebook page, hosted fundraising activities, applied for grants and are now developing a plan to secure a community meeting place. This process has ensured community members are a part of every step to make change in their community and needs to be expanded across the area.

**Keeping Ottawa Seniors Connected**<sup>13</sup> uses a collective impact approach to reduce isolation in seniors. The project will identify isolated seniors, connect socially isolated seniors to existing supports, enable them to better access them, engage them new activities and opportunities to socialize, empower seniors to contribute, cultivate relationships with partners and community members, and find leaders in the seniors community. Gauvin shared lessons learned from the first year: serve food; have consistent, personal contact; work within partnerships; enlist the help of engaged seniors to reach out to isolated seniors; take time to build trust; layer services; be aware of and accommodate diverse needs; know what can negatively affect participation; and increase diversity without creating conflict.

#### **12. What will be different in 10-20 years if this work is successful? 100 words [=97]**

- Coordinated, collaborative program development that meets community needs.
- Better access, awareness and use of and access to community resources.
- More effective communication mechanisms that aggregate and share what people are doing.
- Timely identification and clear multiple pathways to connect people.
- More supportive environments: welcoming, accessible community spaces; connected active and environmentally
- Cultural shift around connection and inclusion: Increased community capacity to make connections and foster social inclusion, increased engagement, inclusion and sense of belonging. Reduced isolation.
- friendly transport systems throughout the West Coast Shores region.
- Social return on investment (i.e. lower cost to health system, etc).

#### **13. What activities will you undertake as part of this grant? 200 words [=164]**

- Hire a community developer.
- Undertake community asset mapping for area; engage partners to share information.
- Engage with people who are isolated through existing members of steering committee and working groups.
- Conduct in-depth interviews to learn about barriers and solutions; what are the paths of least resistance to get connected?
- Review research, literature, and conversations to learn about what works to reduce social isolation and enhance inclusion and sense of belonging.
- Facilitate learning and connections.

- Identify and recruit more members to the steering committee and working groups.
- Develop shared definitions (i.e. connectedness, inclusion, sense of belonging) and the actions that need to happen.
- Develop shared measures and gather data through conversations (i.e. interviews or focus groups) and surveys with people who experience the issue.
- Work with consultants, experts, community groups, and people with lived experience.
- Create a theory of change including goals, activities and outcomes.
- Work with committee members to integrate people's recommendations.
- Produce a comprehensive action plan.
- Report on the findings of the project.

**14. What are the key deliverables you will achieve as part of this grant? How will these deliverables position you to further advance your initiative? 200 words [=196]**

- Identify barriers to belonging and solutions to overcome barriers by ensuring data collection from people with lived experience. This information will ensure actions are based on the realities of those who experience the issue.
- Complete West Coast Shores Asset Mapping inventory. These results will act as pre-initiative data and will help us to set realistic goals and actions.
- Create a report that summarizes the literature review, conversations and survey results as well as identifies our theory of change (goals, actions, and outcomes).
- Develop a terms of reference and partnership agreement that demonstrates the commitment from leaders of multiple sectors and partner organizations to work together, over time, to address, assess and monitor this issue (i.e. agree to how we work together, engage those with lived experience, collect and share data and learnings, as well as identify and take specific actions that generate desired results). These agreements will ensure partners are aligned and committed to working together.
- Continue to engage and recruit community members for steering committee and working groups. More members will help to build awareness of and momentum for the initiative and ensure various partners are involved in taking action and generating results.

**15. What do you hope to learn through this phase of your CI initiative? (100 words) [=98]**

- Identify key learnings from lived experience data: develop strategies/solutions work to strengthen inclusion/belonging and address gaps.
- Completed community resources/asset map: use key learnings to identify how the resources can be more readily available and accessible, identify gaps and identify how the learnings can be expanded across the region.
- Identify strategies to strengthen how people can learn about and access these resources.
- Establish terms of reference and committed cross sector group. Identify representational gaps and engage key community members.

-Learn how to work better together: use learnings to establish an action plan with measurements to strengthen inclusion and belonging.

**Budget (Stage 1 = \$30,000 for up to 18 months)**

**What is the anticipated start date?** March 2018

**What is the term of the grant?** 18 months

**Project Budget Cost Items**

**A. Direct Personnel Costs (Item amount and explanation)**

→ Community Developer – salary and benefits for one day per week for project management = \$25,767.50 (\$330.35/day x 78 weeks)

**B. Direct Non-personnel costs (item amount and explanation)**

→ Reimbursements for Interviews = \$1,200 (\$30 for 40 people)

→ Refreshments for groups and meetings (i.e. training, info sharing, and planning) = \$50 x 6 = \$300

→ Marketing Items and formal report with plan = \$2,300

→ Travel Reimbursement = \$400 (\$0.43 per km)

**C. Overhead and administrative costs**

→ Space for meetings IN KIND through GBACHC, Municipality of Lambton Shores or other partners

→ Printing Costs = \$500 (i.e. agreements, training and data gathering items) IN KIND

**What is the total amount requested from OTF?**

→ **\$29,967**

**Other Sources of Funding: describe what other sources of funding you're expecting.**

- Seniors Community Grant: An application has been made for funding to support "Community Engagers: Rural Connections Project" as a result of the Collective Impact initiative. If funding is secured, the project will improve the health and wellbeing of seniors in our community by focusing on social inclusion. Senior volunteers will be trained to become Community Engagers to support, educate, engage and connect isolated seniors to community programs and services.
- A team at the United Church in Grand Bend used the Be Well data to apply for Seeds of Hope Granting Program for the "Doors Wide Open" project. The goal is to engage young seniors in providing programs for older seniors to reduce social isolation and build a strong sense of community.
- The Transportation Committee received \$8,000 grant from the Grand Bend Community Foundation to conduct a feasibility study specifically on transportation for this same catchment area.

## References

1. Collective Impact Common Agenda meeting. Feb, 7, 2017. Retrieved from <http://www.gbachc.ca/bewell/index.html>
2. Collective Impact Training Workshop. November 18, 2016. Retrieved from <http://www.gbachc.ca/bewell/index.html>
3. Grand Bend Area Community Health Centre (GBACHC). (n.d.). Be Well Initiative. <http://www.gbachc.ca/bewell/index.html>
4. Public Health Association of Canada. (2016). Measuring Positive Mental Health. Retrieved from <https://www.canada.ca/en/public-health/services/publications/healthy-living/measuring-positive-mental-health-canada-social-support.html>
5. Association of Ontario Health Centres (AOHC). (2016). Be Well Survey Phase 1 Report. Retrieved from [https://www.aohc.org/sites/default/files/documents/Be\\_Well\\_Survey\\_Phase1\\_Report\\_web.pdf](https://www.aohc.org/sites/default/files/documents/Be_Well_Survey_Phase1_Report_web.pdf)
6. McMaster Optimal Aging Portal (MOAP). (2016). Loneliness and social isolation are important health risks in the elderly. Retrieved from <https://www.mcmasteroptimalaging.org/blog/detail/professionals-blog/2016/04/08/loneliness-and-social-isolation-are-important-health-risks-in-the-elderly>
7. Centre for Organizational Effectiveness (CFOE). (2015). Strategic Planning Discovery Report. Retrieved from [http://www.gbachc.ca/BoD/orientation\\_manual/6.2%20-%20Discovery%20Report.pdf](http://www.gbachc.ca/BoD/orientation_manual/6.2%20-%20Discovery%20Report.pdf)
8. Living Cities. (2015). The Why and How of Working with Communities through Collective Impact: An E-Course. Retrieved from <https://www.livingcities.org/resources/295-the-why-and-how-of-working-with-communities-through-collective-impact-an-e-course>
9. Building the Field of Community Engagement partners and Babler, T. (2014). Distinguish your work: Outreach or Community Engagement? An Assessment Tool. Retrieved from <http://nexuscp.org/wp-content/uploads/2015/02/BTF-DistinguishYourWork.pdf>
10. National Institute Health and Care Excellence. Community engagement: improving health and wellbeing and reducing health inequalities. Retrieved from <https://www.nice.org.uk/guidance/ng44>
11. Shercon Associates Inc. (2016). Municipality of South Huron Age-Friendly Community Plan. Retrieved from <http://southhuron.ca/sites/southhuron.ca/files/documents/Age-Friendly%20Community%20Plan%20Report.pdf>
12. Personal communication with Gloria Workman, community developer with Destination Prosperity.

13. Gauvin, J. (2017, June). Reducing Isolation in Seniors: a Collective Impact Approach. Retrieved from <https://www.aohc.org/sites/default/files/documents/D8.2%20-%20Reducing%20Isolation%20in%20Seniors.pdf>