

# WORKSHOP 1: ADOPTING AND MAINTAINING A HEALTHY LIFESTYLE

## Partners' Adherence

Lifestyles are influenced by individual and environmental factors.

- General adherence, focusing on the complementarity of both factors.
- A strong focus on the environments (with ambiguity) with an emphasis on the family environment, via the children in some cases, but also the societal environment
- There is currently a momentum
- I am coming back to ambiguity (the notion of environment is too global, needs to be clarified)
- **2 opposing opinions:**
  1. It is better to reflect on the necessary changes in practices
  2. It is more effective to focus on one habit (tobacco reference)

## **Adherence to the conditions stated**

<i>Conditions</i>	<i>Number of persons who have stated that this is a priority</i>
Availability of diverse and quality services	92
Accessibility of quality areas and food	105
The continuity and complementarity of actions taken by a large number of partners	105
The quality of the workers and work with youth	62
The implementation of lasting measures	89
Changes in policies, if necessary	79

- Other conditions specified:
  1. More adapted (to age groups and the reality of the communities)
  2. Proximity + transportation
  3. Complementarity first (partners' actions)
  4. Strange: the quality of the interventions and participants is mentioned less frequently  
Also, the importance of a picture, a common vision and the notion of enjoyment

## What works for your community?

The causes (why it works for your community?)

- The decision makers are present and a driving force in their organization
- The same players on the same issues (in all the networks)
- We have a common vision (common calendar in some cases)
- QeF is an additional resource to what is offered in the communities
- There are a limited number of priorities

- The strategy is slowly being adopted
- Information travels from one network to another
- Tools are available
  - to reach families
  - to facilitate QeF's process and promotion
  - to assume the costs of the process (new money)
- Workers are trained and available full-time
- The homogeneous environment
- Youth (adolescents) and their parents are together

### **Examples of procedures / smart moves to make things work better in the community**

- Projects coordinated between several networks (recreation/health) or institutions (CSSS/City) or organizations (community/city)
- Implementation of family policies and benefits for at-risk families
- Creating a profile: attract interest
- Psychomotility / school yard animation
- Community and roof top gardens
- Community kitchens / public market
- Acti-leaders / iso-active
- Student employees during the summer
- 2<sup>nd</sup> transportation for active children

### **Obstacles encountered in your community**

- Elected officials have concerns and priorities other than HL (lack of strong leadership)
- There is a split in the communities' programs / procedures / requirements for accountability (Corporate ego)
- Lack of expertise:
  - For working together (different cultures)
  - To change environments (as is being done)
- Difficulty in reaching:
  - At-risk people (fear of being labelled, fear of moralism)
  - Parents from underprivileged areas (feel incompetent)
- Lack of accessibility:
  - To services
  - To healthy food
  - To information (good habits)
  - To promotion (marketing directed towards other types of food)
  - To transportation
- Size of the territory vs transportation
- Non-existent infrastructures, especially in rural communities
- Human resources (absence, retention, training budget, ability to speak the language of the community) vs tiring out those who are continuously called upon

- Understanding and sharing the mission
- Suspicion vs perception that we are being told what to do from above, or from outside; that a new type of organization is being added to the one that exists (QeF); that new requirements of accountability are being added

## **WORKSHOP 2: LOCAL MOBILIZATION**

### **Partners' adherence to the importance of the mobilization strategy and its requirements**

Yes, with the addition of 5 conditions:

1. That everyone be involved and contribute according to their abilities;
2. That money be a means, not the goal;
3. That who does what for whom be clearly mapped out;
4. That we do not over-analyze;
5. That it does not replace what is already being done;

Because:

1. This enables better understanding and a better diagnosis;
2. More participants allow for a wider opening;
3. It is a more effective and lasting way to obtain results;
4. It is a better way to reach all living environments;
5. It promotes a common vision.

2 negative statements: doubt that this is a realistic long-term strategy

#### **Conditions**

<i>Condition</i>	<i>Number of persons who have stated that this is a priority</i>
Strong, steady and unifying leadership	98
Adhering to a common and shared vision	93
Intersectoral action	117
Effective governance	80
An evaluation* and renewal of the mobilization	43

\* This depends on how

Other conditions that were stated:

- The child must be the main focus
- The parents must be involved as partners
- The partners must rapidly see small successes, in specific areas
- Prioritize the stabilization of resources in order to avoid potential exhaustion

- Establish a win/win relationship

## **Examples of procedures / smart moves to make things work better in the community**

1. Presence of decision-making leaders; adapt structures of governance; describe needs and take inventory of what is being done.
2. Presence of regional actors within the organizations; regional discussion groups that are kept informed about local plans of action; sectoral and intersectoral tables implemented; consolidation of expertise, in one place; support from regional teams.
3. An opportunity to mobilize all the schools and obtain the adherence of the direction; an opportunity to send a common message to all the communities; to bring in additional resources and share resources between partners; to mobilize around the request for support from QeF.
4. Progressive mobilization around the vision (children's needs) rather than money.
5. Creating liaison and communications officer positions between organizations.
6. Specific conditions:
  - a. More accessible levels;
  - b. Recreational committees everywhere;
  - c. Arrival of school transportation;
  - d. Fusion of discussion groups;
  - e. Public transit for extracurricular activities;
  - f. Better training.

## **Obstacles encountered**

1. Large number of tables and discussion groups; the isolated work of organizations; the turnover of partners, human resources and volunteers.
2. Malaise/ frustration/ rejection with regard to the new QeF mandate:
  - a. Disappointment of community organizations, especially those devoted to families;
  - b. Money flowing through QeF;
  - c. Local autonomy becomes disguised vs rigid monitoring and accountability;
  - d. QeF is becoming "bureaucratized" (extreme criticism... use of the same vocabulary and processes as government departments);
  - e. "Top down" directions.
3. The absence of certain important partners.
4. Multiple parallel accounts: by project here, by program elsewhere.
5. Time.
6. The image or perception of a buffet.
7. The absence of data (picture).
8. Communication that does not operate in each organization.
9. The focus on money.

## **Challenges to be met**

1. To find, first of all, methods of conciliation, ways to continue to provide service and effective governance where there are too many programs and too many locations.
2. Shared leadership.
3. To allow each partner to find solutions vs challenges.
4. To arrive at a common vision and that all partners work together at each step.
5. To make the evaluation attractive, necessary and make a good diagnosis.
6. To ensure the project's continuity beyond the money from QeF.
7. Integrate QeF into the existing structures.
8. Mobilize the parents.
9. A communication challenge.
10. Prioritize local actions.