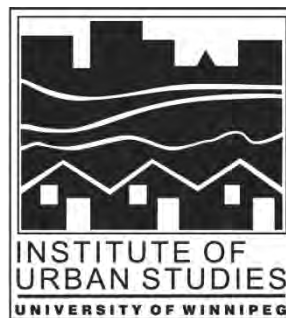


A Community Based Needs Consultation of the Inner City: Notes from Focus Group Sessions

ca. 1989

The Institute of Urban Studies





THE UNIVERSITY OF
WINNIPEG

FOR INFORMATION:

The Institute of Urban Studies

The University of Winnipeg
599 Portage Avenue, Winnipeg
phone: 204.982.1140
fax: 204.943.4695
general email: ius@uwinnipeg.ca

Mailing Address:

The Institute of Urban Studies

The University of Winnipeg
515 Portage Avenue
Winnipeg, Manitoba, R3B 2E9

A COMMUNITY BASED NEEDS CONSULTATION OF THE INNER CITY: NOTES FROM FOCUS GROUP SESSIONS

Published ca. 1989 by the Institute of Urban Studies, University of Winnipeg
© **THE INSTITUTE OF URBAN STUDIES**

Note: The cover page and this information page are new replacements, 2016.

The Institute of Urban Studies is an independent research arm of the University of Winnipeg. Since 1969, the IUS has been both an academic and an applied research centre, committed to examining urban development issues in a broad, non-partisan manner. The Institute examines inner city, environmental, Aboriginal and community development issues. In addition to its ongoing involvement in research, IUS brings in visiting scholars, hosts workshops, seminars and conferences, and acts in partnership with other organizations in the community to effect positive change.

HT
169
C32W885
no. 324

**A COMMUNITY BASED NEEDS CONSULTATION OF THE INNER CITY:
NOTES FROM FOCUS GROUP SESSIONS**



**INSTITUTE
OF URBAN
STUDIES**

THE UNIVERSITY OF WINNIPEG

This document consists of draft notes taken at focus group sessions which were conducted April through June, 1989 for a Community Based Needs Consultation of the Inner City.

The results of this Consultation are discussed in the report entitled: *A Community Based Needs Consultation of the Inner City: Summary Report.*

TABLE OF CONTENTS

	PAGE NO.
LISTING OF ALL FOCUS GROUP SESSIONS COMPLETED	1
NOTES FROM FOCUS GROUP SESSIONS CONDUCTED WITH SERVICE USERS	2
Individuals With Mental Health Difficulties	3
Seniors	9
Non Native Youth and Native Youth	17
Children	24
Single Parents - Non-Native	28
Single Parents - Native	33
Natives	38
African Immigrants	42
South Asian Immigrants	46
South East Asian/Indo Chinese Immigrants	50
Latin, Central and South American Immigrants	54
Recent Immigrant Young Adults	58
NOTES FROM FOCUS GROUP SESSIONS CONDUCTED WITH SERVICE PROVIDERS	62
Mental Health Service Providers	63
Senior Service Providers	69
Children and Youth Service Providers	74
Single Parent Service Providers	79
Native Service Providers	85
Immigrant Service Providers	89
General Service Providers	97
DISCUSSION QUESTIONS USED IN FOCUS GROUP SESSIONS	103

LISTING OF ALL FOCUS GROUP SESSIONS COMPLETED

<u>SERVICE USERS</u>	<u>LOCATION</u>	<u>DATE</u>
1. Individuals with Mental Health Difficulties	U of W,	April 5
2. Seniors	U of W,	May 1
3. Seniors	St. Boniface A & O, 180 Cathedrale	June
4. Youth	Freight House, 200 Isabel St.	May 10
5. Native Youth	294 Ellen	June 27
6. Children	Knox United, 400 Edmonton	May 11
7. Children	River Elm Parent Resource Centre, 500 Riverton	May 17
8. Single Parents - Other	Elgin Parent Child Centre, 84 Isabel	May 29
9. Single Parents - Native	Elgin Parent Child Centre, 84 Isabel	May 23
10. Native	a) Native Employment Centre - 388 Donald	June 22
	b) Ma Mawi Centre, 531 Notre Dame	June 29
11. African	Immigrant Access, 294 William	June 6
12. South Asian	International Centre, 406 Edmonton	June 13
13. Latin Central and South American	Immigrant Access, 294 William	June 19
14. S.E. Asian/Indo-Chinese	Immigrant Access, 294 William	June 20
15. Recent Immigrant Young Adults	International Centre, 406 Edmonton	June 22
<u>SERVICE PROVIDERS</u>	<u>LOCATION</u>	<u>DATE</u>
1. Mental Health	U of W,	April 5
2. Seniors	U of W,	June 7
3. Native	Indian & Metis Friendship Centre, 239 Magnus	June 19
4. Single Parents	U of W,	June 20
5. Children & Youth	U of W,	June 24
6. Immigrants	U of W,	June 27
7. Generic	U of W,	June 22

**NOTES FROM FOCUS GROUP
SESSIONS CONDUCTED WITH SERVICE USERS**

**FOCUS GROUP SESSION
WITH
INDIVIDUALS WITH MENTAL HEALTH DIFFICULTIES**

COMMUNITY BASED NEEDS ASSESSMENT OF THE CORE AREA

FOCUS GROUP SESSION

WITH

INDIVIDUALS WITH MENTAL HEALTH DIFFICULTIES

The following organizations were contacted in identifying participants for this session:

- 1) Doray Enterprises Incorporated
- 2) Society for Depression/Manic Depression of Manitoba
- 3) Canadian Mental Health Association of Winnipeg
- 4) Health Sciences Centre
- 5) Klinik, Inc.
- 6) Community Ministries
- 7) Villa Vita
- 8) Society of Self Help
- 9) Misericordia General Hospital
- 10) Grace Hospital
- 11) City of Winnipeg Parks and Recreation
- 12) Sara Riel Inc.
- 13) St. Boniface Hospital

In total there were nine participants involved in this session.

1. All of the participants in this focus group resided in the core area. Reasons stated for how they came to live in the core area were as follows:
 - were raised in the Core Area
 - near all the facilities they used
 - services are closely concentrated and easy to get to - no bus
 - housing is within their fixed budget
 - supportive housing is available through CMHA in the area

2. Participants liked the following about living in the core area:
 - lots of services; close to facilities
 - nice neighbourhoods; quiet (depends on which part of city)
 - people are friendly
 - no need for bus passes which they can't afford on welfare
 - humble; spiritual
 - ethnic mix
 - people not stuck in the 50s; people downtown more progressive

3. Participants disliked the following about living in the Core Area:

- drugs
- fights
- alcohol Abuse
- murders
- crime rate
- run-down rooming houses
- poor grocery shopping

Participants said generally they felt safe, but indicated the following times when they did not feel so:

- when they attempt to go out for evening walks; when they are at home alone - apartment blocks tend to be noisy; when they see people at 10:00 A.M. going to bars or the Liquor Commission

4. Participants used the following community services in the core area:

- | | |
|---|--|
| - Pubs | - Pool Halls |
| - Income Tax Services | - University of Winnipeg |
| - Sherbrook Pool | - Bowling Alleys |
| - Society of Self-Help | - Sargent Park Complex |
| - Entrepreneurial program through Core Area | - Norwood Pool |
| - MAPO | - Coffee Shops |
| - Broadway Optimist Club | - Spas |
| - AGAPE - Soup Kitchens | - Welfare Office |
| - Winnipeg Harvest | - Community Mental Health |
| - English as a Second Language | - Independent Living Programs |
| - All Saints Church | - DORAY |
| - St. Margaret's Church | - St. Matthews/Maryland Community Ministry |
| - Calvary Temple | - West Broadway Community Ministry |
| - Knox United Church | - Skills Unlimited |
| - City of Winnipeg Parks & Recreation | - Stella House |
| - Klinik, Inc. | - Employment Preparation Centre |
| - Health Sciences Centre | - Q's Health Centre |
| - St. Boniface Hospital | - Q's Bureau |
| - Misericordia Hospital | - Manpower Offices |
| - Young United Church | - Consumer Credit Counselling |

5. Participants used the following community services outside the core area:

- Super Value Stores
- Concordia Hospital
- Grace Hospital
- Assiniboine Park
- Victoria Hospital
- Seven Oaks Hospital

6. Participants indicated these problems when accessing:

a) Housing

- lack of bachelor suites; lack of anything decent that is within welfare rates
- lack of places to live with some supports (supportive housing units)
- lack of housing where one can gain a community feeling

b) Employment

- no bridge between discharge level from hospital and the level at which one can resume a job
- their options are limited - because of this most don't even try
- Doray doesn't help you obtain skills
- programs need to pay more than minimum wage
- very little job retraining is available
- very little vocational rehabilitation is available
- no incentive for people to go back to work

c) Health Services

- very few walk-in crisis services
- health providers do not have enough time to spend with patients
- lack of beds
- mental health workers are overworked

d) Education/Training

- very few appropriate or varied training programs available
- small numbers are accepted in to available programs
- it is hard to find out about programs
- not all service providers are aware of programs

e) Recreation

- very few opportunities for people to meet socially; chat over coffee
- information not always available
- depending upon situation, not enough variety and number of programs

7. Participants indicated that a major problem encountered in accessing any service was the stigma attached to having been, or being, mentally ill. The public tends to be misinformed and believes the associated myths. It was felt that many people try to hide their situation due to the pressure to perform.

8. Participants felt that the needs and priorities of the age group 25-45 would vary from other age

groups. This age group would be more concerned about stigma and not fitting into categories with the rest of the population. As well:

- the work ethic is stronger with this age group
- the need/desire to work is stronger, thus education/training/employment issues are more critical

9. Participants viewed needs and priorities between core and non-core areas as being the same. In the core, however, there may be a higher alcoholism rate, more poverty and a higher concentration of mentally ill. Participants felt that needs are basically universal - to develop positive self-esteem, overcome limitations and gain access to services.

10. Participants prioritized services in this order of importance:

- 1) Health services
- 2) Housing
- 3) Employment/Education/Training
- 4) Recreation

11. Participants indicated the following "gaps" in services:

a) Health

- lack of quality discharge planning
- lack of crisis walk-in clinics
- lack of friendly, compassionate, caring professionals

b) Housing

- lack of affordable and quality housing
- both supportive and independent living environments are needed

c) Employment

- lack of vocational training programs that pay above minimum wage
- no programs bridge the gaps from release from hospital to part-time, then full-time work
- lack of information provided by caregivers

d) Recreation

- if not looking for work, the days become long
- more day programs are required

12. Participants suggested the following when considering how these "gaps" might be filled:

a) Health

- more community mental health workers
- more caring, compassionate counsellors; not necessarily psychiatrists
- need for 24-hour walk-in clinics
- peer counselling; self-help; access to others who have experienced similar problems
- pastoral-related services

b) Housing

- development of more supportive housing programs
- Increase staff available to assist with housing placements

c) Employment

- incentive program to get people back to work
- pay more than minimum wage
- provide base assistance; allow a person to keep more of the money they earn to get ahead in case the job does not work out
- keep individuals on assistance for a time period to make sure a job works out
- set up programs that provide: a bridge between discharge and employment; skill development workshops; more choice in occupations; target spaces in Red River Community College for the psychiatrically disabled

13. The participants felt that the Advisory Council should fund projects that were developed by people who had used or are currently using services. Proposals should be vetted through the users in the system to see if they are appropriate. They suggested consulting with a group similar to focus group to review proposals and give feedback to the Council on appropriateness.

**FOCUS GROUP SESSION
WITH
SENIORS**

COMMUNITY BASED NEEDS ASSESSMENT OF THE CORE AREA

FOCUS GROUP SESSION

WITH

SENIORS

There were two components to this session. The first consisted of a focus group session with nine participants living in various geographic locations of the core west of the Red River. The second component entailed a session conducted by and at the Senior Centre in St. Boniface/St. Vital with a group of seniors that meets every Thursday afternoon. The notes from both sessions are presented here.

The following community organizations were contacted in identifying participants for the focus group session with seniors:

- 1) Age and Opportunity Senior Centres: Smith Street; Fort Rouge/River Heights; West End; St. Boniface/ St. Vital
- 2) Community Home Services
- 3) Creative Retirement Manitoba Inc.
- 4) Federation des Aines Franco-Manitobains Inc.
- 5) Gwen Sectar Creative Living Centre
- 6) Lions Club of Winnipeg Housing Projects: Lions Place; Lions Manor; Ellice Place
- 7) Manitoba Society of Seniors
- 8) Klinik

Part I: Focus Group Session

The nine participants varied in age from 60 to 75+ and consisted of the following:

- 1) Female - moved to Lions Manor because she wanted to have her ill husband and mother living under one roof; her husband has since passed away but her mother is still living.
- 2) Female - resident of a seniors facility on Sargent Avenue; active in the West End Senior Centre.
- 3) Female - owns a condominium in Regency Tower; will be moving into Fred Douglas Place next month (lack of restaurants in the Regency Tower area is the reason for moving).
- 4) Female - has resided in the same house in Fort Rouge for 41 years; is a peer councillor at Age and Opportunity and also a volunteer at Creative Retirement.
- 5) Couple - reside in own home in the West End; active in West End Senior Centre.
- 6) Male - has lived in the Core for a number of years, previously in a house now in an apartment; chose to live in the Core because he has a business there and wants to be able to walk to work.
- 7) Male - has lived in the core since the 1950s; involved in programs at Klinik.

- 8) Male - formerly of West Kildonan now residing in Lions Place; family pressured him to move into the project after his wife died.

1. The four main concerns of this group were:

- a) Housing
- b) Care
- c) Security
- d) Health
- e) Transportation

Secondary concerns were:

- f) Education
- g) Green space

a) Housing

- Waiting lists for projects such as those sponsored by the Lions are horrendous.
- The senior couple found these waiting lists so long they completed necessary repairs to their house and decided to remain there; they feel their variety of needs (shopping, transportation, socializing) could be met by either living in a house or an apartment.
- Others see the opportunities for socializing to be the great advantage of living in a project with programs.
- Priorities should be in providing housing complexes which: provide various levels of care that allow a senior to move through the levels as needed; accommodate couples whose needs may vary; provide health care, prevention and counselling; have adequate green space.
- The elimination of three floors of nursing homes at Lions Manor has upset many residents because they will now be forced to move out of this project once their care needs increase.
- Middlechurch was cited as an excellent housing model for couples.

b) Care

- A number of problems with Community Services and home care were cited: poor management; assistance is available only on a limited basis; assistance is not available on short notice for urgent problems; if assistance from a neighbour or relative is received in urgent situations, home care discontinues its services because it assumes the senior has access to help on an unlimited basis; home care doesn't move furniture or clean windows/ovens and this is the type of work seniors need most help with; on the other hand some services such as wall washing are provided but are not a high priority need.
- All stressed that there has been a significant increase in needs for services because families and neighbours use to be more available/willing to help.
- Most felt a lot of seniors are now demanding services above and beyond "what a person should get"; government programs have in many ways made seniors dependent on them and unappreciative of the assistance; programs should help seniors to keep doing things for themselves.
- There is too much duplication of services; agencies should collaborate to clearly determine what their mandates are so that they might better serve seniors.
- A neighbourhood based volunteer group would be a worthwhile project to attempt although participants recognized that these types of projects are extremely costly.

c) Security

- There tended to be some disagreement regarding how safe seniors felt their neighbourhoods were; some have no fears about venturing out during evening hours while others were quite the opposite.
- Despite disagreements, all felt that: community policing should be reinstated; the presence of panhandlers should be addressed; the presence of teens "hanging out" at parks and shops after closing time should be addressed; video shops/arcades/pawn shops attract rough types and seniors homes should not to be located near them.
- It was recognized that a number of very good educational programs, such as Neighbourhood Watch, are already in place and there is not, therefore, the need to design similar programs.

d) Health

- Health prevention should be promoted in conjunction with health treatment.
- There is a need for health care clinics which provide nutrition and general health information and which are available to seniors on a walk-in basis.
- The health promotion clinic which shall soon be operating at Lions Place was cited as an excellent model; the clinic will promote preventative health care and will be open to all seniors 55 years and over.

e) Transportation

- Needs are being met for those living downtown; for those still in their own home, however, there is a need for more shuttle services.

f) Education

- Participants vented frustration over the lack of information regarding programs and services that are made available to seniors upon their retirement; the "old retired" in particular are not aware of many programs for which they may be eligible.
- It was recognized that the Age and Opportunity Centre does have an information network but what is needed is a much expanded central information system.
- Information dissemination should first be targeted for those still in their own home as opposed to those in public housing or projects sponsored by the Lions.
- One particular financial area in which seniors should be educated is the "mortgage in reverse" option.
- Seniors whose volunteer work involved information dissemination did not perceive the inadequacies of program and services promotion to be as great a problem as did those who were on the receiving end of information.

g) Green Space

- Despite the advantages in terms of amenities and services found in the downtown, seniors commented upon the lack of "green open space" to which they have access; many core projects do not have adequate open space for sitting and walking outside.
- There is also a general lack of seating in existing outdoor open space, along sidewalks and in the overhead walkway system.

2. Additional Comments

- The key in dealing with seniors is to recognize that they are a diverse population with varying needs.
- Programs must ensure that seniors are doing things for themselves.

3. Observations

- This group of seniors was a highly motivated conscientious group.
- Seniors were extremely appreciative of the opportunity to participate in the focus group session. Generally they are not consulted regarding programs that affect them and feel they have the most pertinent viewpoints to contribute. All agreed they would very much like to participate in such a session again.
- Networking among the various seniors occurred at the close of the session. Many of the participants exchanged telephone numbers so that they could continue discussions on many of the issues raised in the session.

Part II: Focus Group Session Conducted by and at St. Boniface/St. Vital Senior Centre

1. The six participants consisted of the following;

Six women who have resided in the area north of Provencher Boulevard and who attend the St. Boniface North Satellite Senior Centre at 212 Dumoulin Street on a weekly basis.

- Senior female widowed, living in a one-bedroom EPH apartment block. Moved from the country to St. Boniface 40 years ago. Franco-manitoban.
- Senior female, widowed. Resident of St. Boniface for 27 years, moved in from rural area. Has lived in a 4-plex for the last 14 years. Dutch background.
- Female, mid-70's, moved to St. Boniface from rural Manitoba with her family 58 years ago. Lives alone in own home and has been widowed in the past year. Wants to move into an EPH in the area as she feels living north of Proventcher, she is too far from the Cathedral, good bus service, stores, and other services. Finds looking after the house and yard draining. Has a heart condition yet is still very active in the centre and in the community. Franco-manitoban.
- Female, age 77, widowed in the past 2 years shares her home with her 20 year old grandson who works. Has lived in St. Boniface for 63 years having moved in from rural Manitoba with her family. Franco-manitoban.
- Female, mid-70's, of Polish-English background. Married, lives with husband in own home. Resided in St. Boniface for 70 years, moved from rural Manitoba.
- Older female in 80's, married, living with husband in own home. Has lived in St. Boniface for 65 years, 45 of them in this same home. Her husband was born in this house (he's 86) and lived most of his life in the same house. Franco-manitoban.

2. All of these woman indicated that they would not move from the community; "it's home", "always lived here", "friends are here", "know the area". While they note that some vandalism does take place and break-ins do occur, it is felt that St. Boniface is a safe and secure area to live in. They are not afraid to be on the streets and can leave lawn furniture unattended overnight. A sense of community prevails and they 'look out' for one another.

3. Community services used include:

St. Boniface North Satellite Senior Centre

VON, Meals on Wheels, Community Home Services (one woman has house-cleaning services every 5 weeks)

area churches

Most stressed their independence and that they tended to rely on family members such as grandchildren or neighbors for supports (ie) transportation to go shopping, additional assistance in the home or yard, etc.

Medical facilities in the community are felt to be of a high quality and convenient; they may use some in downtown Winnipeg when seeking specialists.

Area EPH's have a doctor from a local facility who runs a clinic once per week in the apartment block. He also makes arrangements for some labwork to be collected on-site, (eg) sends a nurse to the individual's home for blood samples, and makes housecalls himself.

4. All members of this group indicated that they felt there were enough services in french and english. They also expressed strong positive feelings about being able to access housing and services in the language of their choice. One woman has an elderly Laotian neighbor who seems to experience difficulties in communicating in french or english; there were feelings that it may be difficult for immigrant groups who do not speak either language to be adequately serviced in the community.

Primary concerns focused on;

- a) transportation
- b) housing

Secondary concerns included;

- c) recreation and education programs
- d) care
- e) area parks

a) Transportation

Of these six women, four have never owned or had access to cars as adults. As children growing up, they may have had a car or truck in the family. However as adult women living with their husbands, they had never owned a car within the family unit. As a result, they have depended on public transportation extensively. One woman who does own a car is waiting to have a second cataract operation (she is in her eighties) before starting to drive again. They are all fairly mobile, live within walking distance of most necessary services or use buses and cabs frequently or in winter. They expressed a difficulty in getting to the Cathedral from the area north of Provencher, which is 3-4 blocks off of bus routes. As well, the Sunday bus schedule is somewhat lacking.

It was suggested that the 3 buses servicing the St. Boniface routes be better scheduled so that they don't all arrive at the same time and that a feeder or shuttle bus operate in the area north of Provencher, or at least during the winter months.

b) Housing

The two married women and one other would rather "die in their own home" than move into an apartment, but they see the advantages of living in senior apartments with increased social supports, other people to interact with, and meal programs. They noted that moving from their own home into smaller inadequate suites was stressful and likened it to living in "a barn with little chicken coops". They want bigger suites with at least one bedroom and more adequate storage space. They do not want bachelor suites although it was recognized that some people cope independently only because of the size of the apartment. It was felt that the waiting period for admission into EPH's and personal care settings are too long. One woman has been on a waiting list to enter an EPH since 1983; she wasn't ready to move when they first contacted her. Since her husband's death, she is looking forward to moving out of her home.

At a neighborhood level, there is a need for increased personal care facilities especially for french-speaking seniors who need to place a spouse. It was noted that there are too many people waiting placement into a PCH who are currently in St. Boniface Hospital. Facilities providing staggered levels of care ranging from independent EPH settings to personal care facilities were desirable to enable individuals to remain in their community for as long as possible.

c. Recreation/Education Programs

Opportunities are available; this group uses a wide variety in the community and across the city. They participate in what interests them. It is felt that there are many 'closed' groups (ie) tenant's associations, cultural centre programs, which cause problems for people living in homes in the community. They feel that they are not always welcome to participate even if a friend who is a member invites them.

They have had past experience where well-intentioned program staff from various community organizations want to implement programs for seniors with little or token consultation as to what needs and the interests of the seniors are, or they try to change the days and times of existing programs.

d) Care

Most of these people don't bother with community supports even though they are aware of them and qualify for the services as they prefer to remain independent. They do note a gap between

being discharged from the hospital to their own home; it is difficult to obtain community services for emergency, short-term needs.

Four of the six women are or have been primary care-givers for their husbands. They found it difficult to get their husband to agree to have outside assistance in bathing, etc. They expressed difficulty in ensuring variety in shopping and preparing meals due to transportation problems. They also recognize the need to pay for quality fresh goods and that specialized diets may cost them more but local corner stores within walking distance can't always meet their needs. This might be a detriment for those older less mobile seniors in their neighborhood.

e) Area Parks

It was felt that river banks should be retained as open park space rather than developed into housing or commercial projects and that it is important to have adequate play and park space for children and their families who may be apartment dwellers. There is also a need to improve policing of these areas.

5. The concept of living in the core area doesn't appear foreign to this particular group. They have been involved in core area grant applications through their centre and the community in the past and recognize the benefits of living in the core. They agree that most people perceive that the 'core' is a 'seedy area located in the vicinity of Logan and Main'. It was mentioned that non-core residents don't qualify for financial assistance for residential/community improvements but felt that funds should continue to be made available to assist the core area community in sprucing up it's image, doing renovations, etc.
6. Concerns of these who have lived north of Provencher include that;
 - as older people move out of this area, they are replaced by younger families with children who have different housing and transportation needs than the seniors still residing there (the families for the most part have cars)
 - homes sell quickly and are expensive in this area; this may not support the need for additional senior housing
7. For the most part, this group felt satisfied with what they have while recognizing that there are many seniors who aren't aware of the opportunities and resources available to them and therefore have many unmet needs. Even for those seniors residing in EPH's with a variety of services and programs under one roof, there are people who choose to isolate themselves. General consensus was to recognize that the senior population is just as diverse as other age groups and that people for the most part choose how they wish to live and inter-act within the community.

**FOCUS GROUP SESSIONS
WITH
NON-NATIVE YOUTH AND NATIVE YOUTH**

COMMUNITY BASED NEEDS ASSESSMENT OF THE CORE AREA**FOCUS GROUP SESSIONS****WITH****NON-NATIVE YOUTH AND NATIVE YOUTH**

Two focus group sessions were conducted with youth - one with non-native youth and the other with native youth. While the non-native session followed a questioning route similar to that used in other sessions, the native session was conducted with the purpose of expanding upon the various issues raised in the Youth Assembly sponsored by the Ma Mawi Wi Chi Itata Centre, Inc.

Part I: Focus Group Session With Non-Native Youth

The following schools and community organizations were contacted in identifying participants for this session:

- 1) Gordon Bell High
- 2) Tech-Vocational High
- 3) R.B. Russell Vocational
- 4) Argyle High
- 5) Aberdeen School
- 6) Pierre Radisson
- 7) College Louis-Riel
- 8) Elmwood High
- 9) Augustine Family Resource Centre
- 10) Winnipeg Boys and Girls Club

The eight participants consisted of the following high school and junior high students:

- 1) Female; 15 years - attends Gordon Bell, resides in south-west quadrant of the core; Chinese immigrant to Canada ten years ago.
- 2) Male; 15 years - attends Gordon Bell; resides in south-west quadrant of the core; Chinese immigrant.
- 3) Female; 14 years - attends Isaac Newton; resides in north-west quadrant of the core.
- 4) Female; 15 years - attends Isaac Newton; resides in north-west quadrant of the core.
- 5) Male; 18 years - attends R.B. Russell; formerly resided in the central north-west quadrant of the core, now resides on the fringe of the most northern boundary.
- 6) Male; 18 years - attends Elmwood High; native adopted by two white parents.
- 7) Female; 16 years - attends Elmwood High; resides with mother in low-rental project; formerly from Thompson, Manitoba.

Participants could not be found from St. Boniface. The two schools contacted suggested students were unwilling to take part in a study pertaining to "the core" because they do not consider themselves to be part of "that area".

1. Participants dislike the following about living in the core area:

- the negative publicity it tends to generate
- the contrast of living conditions; one street may be fair and the next in much worse condition; residents fear encroachment of the poor areas into the better areas
- "turf" boundaries are established; exceeding those boundaries could mean endangering oneself
- the presence of prejudice and racism particularly against natives and immigrants
- the dirty/unkempt appearance (eg.) presence of garbage, lack of street repair (Elmwood)
- the Red River is made attractive to youngsters but there is a lack of safety measures to keep them within safe distances (Elmwood)

2. Participants like the following about living in the core area:

- generally it is quiet and peaceful despite intervals of rowdiness
- tends to be friendly
- the presence of kids playing outside
- the old people (Elmwood)
- multiculturalism (Elmwood)

3. The three major problems facing youth in the core are:

- a) lack of communication skills required to deal with problems
- b) lack of adequate recreation programs
- c) lack of understanding of various ethnic groups which breeds prejudice and racism

Additional Issues

- d) school problems
- e) drugs/alcohol

a) Lack of Communication Skills

- this tended to be the greatest youth issue
- many youths have difficulty communicating with: parents; teachers; people who are "different" from themselves
- increasing youths' communication skills would solve many of their problems because they could intelligently and rationally discuss issues with others
- part of this problem is a lack of "competent" adults (teachers, counsellors) who know how to deal with youth
- lack of communication skills contributes to problems such as: teenage pregnancies; drug/alcohol use; truancy and high school dropouts; family problems

b) Lack of Adequate Recreational Facilities/Programs

- existing recreational areas are often not utilized as well as they could be

- parks often do not have adequate safety measures such as fences nor signs that warn against loitering and littering
- the drop-in centre on Talbot (Firescape) was cited as a really "good" drop-in because it "feels good" and there are lots of "younger" people to talk to
- lack of adequate recreational facilities/programs was thought to be a greater problem for younger children who are not allowed to stray far from home

c) Prejudice and Racism

- white youth tend to discriminate against natives; native youth tend to discriminate against immigrants
- prejudice results from: attitudes displayed by parents; a lack of understanding of the various ethnic groups; "stereotyping" individuals without even knowing them; long-standing rivalries (for example, Elmwood High and Kildonan East)

d) School Problems

- among inner city youth there tends to be a high truancy and dropout rate
- part of this problem results from youth working; once they discover what it is like to have "money in their pocket" they don't care about school any more
- teenage pregnancies also contribute to this problem
- teachers are not strict nor caring enough

e) Drugs/Alcohol

- the participants agreed that substance abuse tends to be less of a problem for their age group than it is for younger children
- youth are moving away from the use of these substances because they have seen what the result has been on an older brother, sister, or parent
- the participants noted that it is interesting that peer pressure leads youth to use drugs but also leads them away from its use

4. Solutions

The participants initially stated that the problems and issues facing their peers generally could not be solved by the application of "money" or the establishment of "physical facilities". The facilitator, however, suggested that funding could be used to sponsor programs and workshops that might help address some of the problems they had outlined. Given this background, the youths suggested funds should be spent to:

- 1) implement a "parent drop-in" centre which would function for parents in a similar manner that "teen centres" function for youths. Parents could network with other parents and participate in programs which would help them deal with their teenage children.
- 2) hold a series of workshops for parents and children which promote and teach family communication.
- 3) organize mini-folkloramas in the schools.

- 4) organize activities/programs which involve the mixing of racial groups.
- 5) implement a "big sister/big brother" program whereby youths who have been in trouble but have "turned themselves around" have the opportunity to be role models for younger children.
- 6) implement programs which capitalize on youths' talents and provide them with the opportunity to display musical, artistic and other talents.
- 7) establish a school for the Arts (acting, music, video, etc.) which is something Winnipeg as a whole lacks.
- 8) organize more dances in a number of core area locations.
- 9) bring shows like those hosted at the Convention Centre (eg. Career Days) to individual schools.
- 10) increase funding to train counsellors and teachers to better deal with youth and then increase the actual number of counsellors.
- 11) increase the number of mediation services to deal with first time offenders.

In terms of capital projects, the youths suggested that funds should be spent to:

- 1) repair roads.
- 2) create more playing parks and recreational areas spaced throughout each neighbourhood.

Part II: Focus Group Session With Native Youth

Nine youth participated in this session. All had experienced difficulties with the law. Two of the participants attended school - one because he likes to and the other because he has to (he would prefer to stay home and watch t.v.). Five of the youth lived at home; the rest lived on their own.

1. Participants disliked the following about the core:

- improper housing
- slum landlords
- loose dogs
- low incomes/poverty which "make people cranky"
- conflicts between Natives and Filipinos
- cooking odours of various ethnic groups which intermingle in one building
- over-crowding - especially when singles allow friends to stay with them
- gangs - one's safety endangered if he crosses over into someone else's territory

2. Issues

a) Drugs

- all youth use drugs; existing programs are useless because they only discuss what the effects are on one's body
- there are unique problems associated with each of the users (sniffers, rubbies, grass smokers, alcohol abusers) of the various drugs
- drug abuse is often the reason the youth have run ins with the law; abuse breeds break and entries for example
- alcohol is pulling families apart

b) Discrimination

- particularly as exercised by the police; Native youth always look suspicious in the eyes of the police

c) Self-Esteem

- it was felt that they all get "painted with the same brush" because of the poor behaviour of a few Natives

d) Employment

- steady employment would make a big difference in their and their families' lives

e) Recreation

- the youth suggested they don't get involved in many programs because they are too lazy and because they need money to become involved
- recreation time is spent "being with girls and drinking"

3. Each participant was asked what his goals were/where he'd like to be in five years time and what problems he expected he would face. Responses were as follows:

- 1) would like to "be working"; problems - not wanting to do it; giving up
- 2) would like to be a lawyer; problems - getting through school
- 3) would like to play in a band; problems - no time to practice
- 4) would like to be a public relations worker with the Federal Government; problems - do not foresee any problems: intend to get a grant to go to university
- 5) would like to be a lawyer; problems - obtaining grants to go to university
- 6) would like to be a social worker dealing with youth; problems - lack of reading and writing skills
- 7) would like to be a doctor; problems - getting there

4. Solutions

- increased availability and access to training programs
- more family activities

**FOCUS GROUP SESSION
WITH
CHILDREN**

COMMUNITY BASED NEEDS ASSESSMENT OF THE CORE AREA**FOCUS GROUP SESSION****WITH****CHILDREN**

Two focus group sessions were conducted with children. One was held with participants of an after school program held at Knox United Church and organized by the Boys and Girls Club of Winnipeg. A second session was conducted at the River Elm Parent Resource Centre with elementary school children from Elmwood.

Part I: Focus Group Session at Knox United

Eleven children, ranging in age from six to twelve were present. One child was white and the remaining were Black, East Indian or Native. Roughly half of the children had lived in the Central Park area all their lives while the other half had moved into this area from other areas.

1. The things the children liked about their neighbourhood were:

- the marble games at one of the nearby parks
- the ice rink in Central Park in the winter
- the large amount of play space at Central Park
- the swimming pools and roller rinks in neighbouring areas
- the number of friends they have

2. The things the children disliked about their neighbourhood:

- men in the park that bother the children
- "rubbies" or "drunks"
- people who use drugs
- kidnapping and rapes occur
- discarded condoms and needles that are found
- the garbage in the streets

3. Suggestions for improvements:

- remove the drug dealers from the area
- clean up the garbage

4. Comments from the facilitator:

- the general lack of nutrition and high percentage of carbohydrates the children intake contributes to their uncontrollable nature and rowdiness
- many of the children attending this after school program are neglected; two of the boys had been found sleeping in the church basement because they had been locked out of their apartments
- physical improvements are not the key to improving the lives of these children; relationship building is

Part II: Focus Group Session at the River Elm Parent Resource Centre

Eight children ranging in age from seven to twelve participated. All of the children were white with the exception of one who was a recent immigrant from East India. The parents of many of the children had lived in Elmwood all their lives.

1. Things the children liked about their neighbourhood:

- close to school
- lots of friends
- safe
- Brazier Park
- Riverton Park
- 3 of the 8 children said there was "nothing" they liked
- the outdoor facilities at Firescape (only those 13+ years are permitted to participate in activities inside)

2. Things the children disliked about their neighbourhood:

- too much traffic
- too many dogs
- hear and know of many people who have been beaten up
- lots of the neighbours are noisy
- the river (one child mentioned his neighbour recently drowned)

3. Programs/Clubs/Community Groups the children were involved in:

- various sports activities/programs offered by the school
- Chalmers Community Club [within the core area]
- YM-YWCA (Kimberley) [outside the core area]
- Concordia Swimming Pool [outside the core area]
- Kelvin Community Club [within the core area]
- one of the ten year old said she and two of her friends formed their own "club" so they would have someone to talk to and share ideas

4. Problems in the neighbourhood:

- some houses are rundown and it makes the whole neighbourhood look bad
- there are lots of play spaces and activities for the "little kids" and "the teens" but nothing for their age group
- some families lack money to allow their children to participate in programs
- there is too much garbage in the streets
- half of the children expressed concern about going to Elmwood High where they understand there is a lot of teenage pregnancies and drug abuse

5. Suggestions for improvements:

- build a drop-in centre for those less than 13
- build an outdoor pool for their age group
- renovate the rundown houses
- eliminate open spaces like the parking lots, where the "drunks" congregate
- give some money to the less unfortunate that walk the streets and to the families who can't afford to clothe or feed their kids properly

**FOCUS GROUP SESSION
WITH
SINGLE-PARENTS: NON-NATIVE**

COMMUNITY BASED NEEDS ASSESSMENT OF THE CORE AREA

FOCUS GROUP SESSION

WITH

SINGLE-PARENTS: NON-NATIVE

The following agencies were contacted in identifying participants for this session:

- 1) Augustine United Church
- 2) Central Child and Family Services
- 3) Elgin Parent/Child Centre
- 4) Ellice Parent/Child Centre
- 5) Elmwood Parent/Child Centre
- 6) Manitoba Anti-Poverty Association
- 7) Pinkham Parent/Child Centre
- 8) Social Assistance Coalition of Manitoba
- 9) St. Matthews/Maryland Community Ministry

There were nine participants in this session - six core area residents and three non-core area residents.

1. Participants came to live in the core area because:

- it is the only housing they could afford
- it is where the social services are concentrated
- for some, it is where they had lived all their life

2. Participants liked the following about living in the core area:

- Central Park area being revitalized; can feel the energy
- convenient access to services
- education opportunities are greater in the core; fee is less for core area residents
- people in the Core are more down-to-earth; socializing is much easier than it is in other parts of the city
- one can meet more people in the core in the same situation -- people with whom one can relate (for example, others on social assistance)
- more social programs in the core, especially groups for sexual-assault victims
- multi-cultural neighbourhoods; some streets become a community; residents form a partnership

3. Participants disliked the following about living in the core area:

- slum landlords who charge high rents for "dives"
- lawns, boulevards not well kept
- violence on streets: gang wars between immigrants; ethnic tensions makes raising children in the core area very difficult
- not able to go out for a walk after 10 o'clock at night
- violence in schools

- school curriculum is not as good in the core area as in non-core area schools
- housing between Core/non-Core different as day and night

4. Participants used the following Community Services in the core area:

- Child and Family Services
- Family Services
- Manitoba Anti-Poverty Organization
- Social Assistance Coalition of Manitoba
- Community ministries
- Food Co-ops
- Food Banks
- Winnipeg Harvest
- Social Assistance: City and Provincial
- Hospitals

5. Participants indicated the following problems while accessing services pertaining to:

a) Social Services System

- it is too focused on intervention; not enough emphasis is placed on prevention which could lessen the need for future intervention
- the bureaucratic system is too large; too much red tape
- people have to know how to access the system; those who are illiterate or intimidated will be unable to use the system
- the medical/dental benefits one receives while on social assistance should be received by those with with low-income jobs
- participants also indicated that there are quite a number of things happening, but:
 - a) there is little or no sharing of information between agencies, and b) there is little information made available by workers to clients

b) Education:

- regarding the SOSAR Program: (Social Opportunities for Social Assistance Recipients): There is very little written information about this program; no brochure. When written information is requested it is not supplied. Information is supplied verbally, but not in writing. There appears to be a very loose structure which facilitates staff preferences/prejudices.
- the system penalizes those who try to improve themselves; puts more stress on them
- very little information and programs co-ordinated among agencies; however, there is information transfer between clients of agencies
- human Resources Department prefers to stream people into short-term (2-year) education programs (so they are employed sooner) versus longer-term programs. The drawback with this is that many jobs found after short-term education/training are low paying dead-end professions. Longer-term education/training often provides more job security and higher-paying jobs.

c) Employment:

- most times, people coming off social assistance are not able to get a high-paying job with benefits; they are then unable to afford dental/medical costs covered by the social assistance program. For this reason many people will choose not to work, and remain on assistance.
- many people on assistance do not want to be on it; some would attempt to be self-employed; social assistance will not allow them to be innovative and attempt to start a business of their own

d) Housing:

- if regional housing is unavailable SAFFR should be available until one makes a certain income over the poverty line
- not enough decent, adequate housing
- single parents are a majority in regional housing, yet there are no playgrounds attached to units in these areas (e.g. skating rinks, pools, etc.)
- not enough regional housing units; long waiting lists
- the city is going to end up with a serious overcrowding issue in the core area if they don't start moving away from large housing units to duplexes

e) Health Care System:

- low income salaries do not provide enough money for families with high medical expenses
- welfare recipients are discriminated against in hospitals
- difficult to find a family doctor
- hospital personnel don't usually inform welfare recipients of their health care rights or available services
- pharmacies charge more to government recipients than non-welfare recipients; prescribe most costly medicine

RECOMMENDATIONS:

- medical/dental expenses should be subsidized when people go off social assistance until their job is secure and wages sufficient so that they can handle all the extras

f) Social Assistance Program:

- staff attitudes towards clients very discriminatory/degrading; clients are treated as though they are out to "rip-off" the system; staff act like the money is coming out of their own pockets.
- does not meet 60 percent of the poverty level
- a woman raising children is not going to put more stress on herself to go back to school, or back to the workplace, when there is very little in the way of supports, either financial or human. The system does not allow for most people to get ahead
- lack of funds to access transportation or recreational services
- money is distributed in such a way that people are unable to buy food in bulk

RECOMMENDATIONS:

- assist Social Assistance recipients to buy co-operatively (i.e., one-half beef)
- allow community gardens in inner-city so that those on assistance could attempt to make ends meet
- increase clothing allowance for 0 to 12-year age group

6. Participants indicated their priorities and needs were as follows:

- increase child care spaces, especially before and after school as well as evening spaces; many of the lower income jobs don't operate between 8:30 - 4:30 p.m.
- increase social assistance rates
- make the social assistance program one that is more flexible and that encourages, rather than discourages people to get ahead
- increase Child and Family Service prevention and treatment programs; groups and programs available in one region should be made accessible to other regions if they do not offer such a service
- open clothing depots during evenings so that working parents can utilize the service
- increase the number of 100-percent-funded education/training programs for single parents that provide:
 - 1) built-in child care
 - 2) medical and dental benefits if a parent is living below the poverty line
 - 3) a smooth transition from social assistance to the training program
 - 4) supports for single parents and children in adjusting to this new routine

7. Participants indicated the following criteria which should be used by the Advisory Council when making funding decisions:

- The Advisory Council needs to be familiar with needs of target groups that the programs they fund will service. The Council needs to educate themselves and develop an awareness for inner city needs.
- Include honoraria in agencies' funds to show appreciation to volunteers; most agencies would not be in existence were it not for volunteers and many, especially in the Core Area, are social assistance recipients
- The funding of outreach programs should be a priority (i.e., programs whereby workers can go into the community and bring people into the various Centres to access existing resources).
- Fund more Parent/Child Centres where Moms can take their children to have experiences with other children their own age and provide some respite for mom
- Fund more prevention programs
- Fund programs that provide the clients an opportunity to build up enough self-esteem, etc. (lost while being on social assistance) to get into training programs/work force.

**FOCUS GROUP SESSION
WITH
SINGLE PARENTS: NATIVE**

COMMUNITY BASED NEEDS ASSESSMENT OF THE CORE AREA**FOCUS GROUP SESSION****WITH****SINGLE PARENTS: NATIVE**

The following agencies were contacted in identifying participants for this session:

- 1) Central Child and Family Services
- 2) Elgin Parent/Child Centre
- 3) Ellice Parent/Child Centre
- 4) Kateri Mission
- 5) Ma Mawi Wi Chi Itata Centre
- 6) Native Women's Shelter TK Kewi
- 7) Native Women's Transition Centre
- 8) North End Community Ministry
- 9) North End Women's Centre
- 10) North West Coop Health and Social Service Centre
- 11) Northwest Child and Family Services
- 12) Pinkham Parent/Child Centre
- 13) St. Matthews/Maryland Community Ministry

1. All three of the participants resided in the core area. Reasons for how they came to live in the core were as follows:

- it is the only area of the city where, on welfare, they could afford the housing costs
- came to live with family in the core and has remained

2. Participants liked the following about living in the Core Area:

- people are more friendly than in other parts of the city
- there are many Natives in the area from whom they can receive support
- there are many places to drop in where they feel they "fit in"

Participants disliked the following about living in the Core Area:

- poverty
- poor family life; children running wild on the streets
- alcohol abuse
- drug abuse
- violence

Participants see themselves staying in the core area either due to cost of housing or their way of life.

3. Participants have at one time used the following Community Services in the core area:

- North End Women's Centre
- Indian Family Centre
- Ma Mawi Wi Chi Itata Centre
- Parent/Child Centres
- Social Assistance
- Child Care
- Family Services

Participants were currently using the following services:

- Parent/Child Centres
- Women's Centres
- Community Ministries

4. Participants indicated these problems when accessing:

a) Housing

- difficulties in finding appropriate housing
- affordable housing units are small and "smelly"; wiring is unsafe; presence of cockroaches
- lack of safe places for children to play
- housing is not safe
- participants find themselves continually moving to find more appropriate housing
- difficulties with slum landlords

b) Employment:

- no opportunities for training to gain experience for jobs
- couldn't even get hired at McDonalds -- no experience; no skills
- many jobs provide evening work only; unable to take them due to lack of proper child care arrangements
- many employment programs treat the applicant like a "gopher"; don't assist in the development of work-related skills/behaviours
- New Careers Program: not enough spaces

c) Health

- hospitals, walk-in Clinics: basically satisfactory; follow up is good
- support/counselling services: counselling requests not always responded to; no prevention, only intervention; one participant went through 49 caregivers until she received a homemaker
- counselling services: long waiting periods
- difficult to find a reliable, steady family doctor

d) Education/Training

- waiting lists are long
- difficult to get sponsorship into training program
- child care money not always available with training programs
- need for more general equivalency development programs

e) Recreation

- there are very few opportunities which residents can afford
- there is a need for more programs like Prichard Place to keep children off the street
- when on assistance, there is no money available for recreational uses
- lack of facilities for little children; more for older children

RECOMMENDATION: Neighbourhood equipment exchanges might allow more children to be involved in programs.

5. Participants indicated that the needs of others, not in attendance at this meeting, would be different from theirs.

- it was stated that many people they know are "in a rut"; they have given up; they do things that are not healthy for them
- people get stuck in poverty; low self-esteem; no confidence
- participants indicated that they don't want to be like these people
- one participant related that she got so low and tired of being on welfare, of having everyone telling her what she could do all the time, and of not having any money to take advantage of opportunities. Through strength from within and many struggles -- with lots of support and assistance from an agency -- she made it "out".

6. Participants prioritized their needs as:

- 1) Adequate housing/suitable employment that paid sufficient to afford adequate housing
- 2) More education/training programs/daycare services
- 3) Suitable and affordable counselling services
- 4) More affordable recreation programs
- 5) Health counselling services

It was felt there were gaps in all of the services addressing these.

7. Participants felt that the needs or priorities for Native male single parents would be similar to those of Native female single parents.

8. Participants indicated that circumstances may be different between core and non-core native single parents. Although recreation would be easier to access and housing would be better, being a single parent in a non-core area would be just as difficult.

9. Suggestions as to how these gaps might be filled:
 - Raise the money allotted for housing through assistance
 - Raise the standards of housing; enforce landlords' regulations
 - Increase more adequate (flexible) daycare spaces
 - Increase number of training programs
 - Increase number of counsellors
 - Allow family physicians to make referrals to specialists
 - In terms of recreation: organize ringette games; provide equipment subsidies to develop programs so children could become involved in activities; provide equipment subsidies to develop programs so children could become involved in activities; provide passes for YMCA which could be taken from special needs dollars; provide access to ballet, tap dancing lessons which is not normally affordable for lower income families.

10. Participants suggested that, regarding the funding decision process, the Core Area Initiative should:
 - ask and respond to what community people say they need
 - move away from short-term grants to long-term grants, or provide resources to programs so they can access long-term funding

FOCUS GROUP SESSION

WITH

NATIVES

COMMUNITY BASED NEEDS ASSESSMENT OF THE INNER CITY

FOCUS GROUP SESSION

WITH

NATIVE USERS

The following agencies were invited to send participants to the Native Users Focus Group:

- 1) Native Alcoholism Council of Manitoba
- 2) Indian Family Centre
- 3) Ma Mawi Chi Itata Centre, Inc.
- 4) Indian Métis Friendship Centre
- 5) North End Community Ministry
- 6) St. Matthews/Maryland Community Ministry
- 7) Anishinabe R.E.S.P.E.C.T.
- 8) Community Education Development Association
- 9) Native Employment Services

Two sessions were conducted with this focus group - one with six individuals at the Native Employment Centre and one with seven individuals at the Ma Mawi Chi Itata Centre.

1. All participants lived in the core area.
 - moved in with relatives or friends
 - only place they could afford

Most would not move because they are close to services and friends.

2. Participants listed the following problems in accessing services pertaining to:

a) Housing

- generally, landlords (slum landlords) are unfair; keep units in disrepair; don't fix items at all or make renter pay for normal wear and tear on units; wiring out of date
- one major roadblock in obtaining adequate housing is finding the support services to help one find a good place; someone who will advocate on residents' behalf.
- it was felt that many slum landlords are influential people, and those in a position to change the situation are their friends--so nothing is done about the situation
- regional housing units are built below standard; not quality housing, but better than private sector
- long waiting lists to access regional housing; authorities must be contacted numerous times if one hopes to obtain a unit
- most of the time, decent housing is above welfare rates and a family is using "food money" to live in a clean, well-kept unit

b) Employment/Education and Training

- more funding is required for Métis people
- need for more literacy programs to teach people to speak, write and read English; many people speak poor English and cannot get a job because of that
- if family (parents) do not learn English, children who do know English stay on welfare with them to help them survive in the city
- native Employment Services (N.E.S.) is excellent; helps people get into Red River Community College. N.E.S. holds workshops; helps people find their interests/skills; helps in finding different types of training. N.E.S. is understaffed and needs more programs to deal with the number of Natives requiring assistance
- many Native people are steered into low paying, dead-end jobs
- programs are needed to promote entrepreneurship; provide practical experience/training
- information is not readily available; central communication of programs is required
- many natives feel they are discriminated against when applying for a job
- training wages are too low for a person to live on; Student Social Allowance is very low
- insufficient financial assistance for transportation costs; only provided a certain number of bus tickets which do not go very far when trying to find a job, i.e., filling out applications, going for interviews
- need for more self-development/awareness programs; being on welfare is hard on self-esteem. How are people expected to improve themselves when departments don't have programs to help them get out of the system? Bureaucrats want to keep clients on welfare so their jobs are not jeopardized
- participants would like to take a University degree; if individual is more mature, funds are hard to find

c) Health

- there is fairly good service at some facilities, but at most there is too long a wait to see a doctor. i.e., 2-2½ hours; if patients are late their appointment is cancelled
- there are also long waits to have a prescription filled
- due to having to wait, some people don't see a doctor until absolutely necessary; by then they are really quite sick
- most pharmacies are very good about explaining how to take medication, etc.
- it is imperative that counselling programs for Natives involve a spiritual aspect; otherwise, the situation is just band-aided
- workers should be given cross-cultural training regarding the differences in values and standards between Native and non-Native cultures
- ambulance fees are high

d) Recreation

- if there were more drop-in services, there would be fewer people using drugs
- need for a cultural centre; a multipurpose building available for diverse activities such as skating, Native games, Pow-Wows, etc.
- lack of promotion of Native artists
- lack of accessibility to existing recreation in terms of, transportation, dollars to pay for equipment and fees, etc. Many parents want their children to be involved in recreational activities, but on low-paying jobs or welfare, there are no funds to spare.

- needs to be an exchange program for equipment; it would help if welfare allowed special needs use or added \$50.00 a month for recreation; most children would then be able to be involved in some program
- overall lack of sharing among agencies regarding information on available programs

**FOCUS GROUP SESSION
WITH
AFRICAN IMMIGRANTS**

COMMUNITY BASED NEEDS ASSESSMENT OF THE CORE AREA
FOCUS GROUP SESSION
WITH
AFRICAN IMMIGRANTS

The following community organizations were contacted in identifying participants for this session:

- 1) Interfaith Immigration Council
- 2) Immigrant Access
- 3) International Centre

There were nine participants in total - three from Eritrea, three from Ethiopia and one from Uganda. The participants had arrived in Canada (Winnipeg) from three months to seven years ago. Three were married with children while the rest were single. The facilitator was from Uganda and had been a newcomer to Winnipeg five years ago.

1. What participants liked about the core:

- no transportation costs
- access to shopping
- access of Core Area Initiative programs
- sense of safety; the police patrol frequently
- availability of services
- some didn't like anything about it

2. What participants disliked about the core:

- some areas are unhealthy for families

3. Issues

a) Housing

- did not appear to be a major issue, most did not have difficulty finding housing

b) Employment

- the main barrier to employment is language; despite a good command of the language, participants recognize that their heavy accents make communication extremely difficult
- skilled persons find it difficult to be underemployed
- the young immigrants lack basic training/skills

- being unemployed or underemployed places a lot of pressure on a person; is difficult mentally
- some have not encountered employment difficulties because they have only arrived a few months ago and have not yet begun to look for work
- others have accepted that finding work will be a long tiresome process, but believe they will eventually find work

c) Health

- no complaints in this area because Manitoba Health is free
- participants are annoyed by health care users and providers who take advantage of the system

d) Education/Training

- Core Area Initiative programs favour those who have no education even though immigrants with a degree from their own country also have few job opportunities
- there is a lack of recognition for the degrees/education obtained outside of Canada; an equivalency program is needed
- there is a need for training/education programs which are run in combination with work experience; this approach might increase a trainee's chance of obtaining work
- volunteer programs are extremely valuable for unemployed individuals; they provide a sense of worth
- participants felt their concerns regarding education/training would be similar among all immigrant groups

e) Recreation

- lack of outdoor exercise/playing fields

f) Socializing

- participants expressed a desire for increased communication between themselves and Canadians
- the Caribbean community was one which was complimented for its efforts in intermingling with Canadians
- a program or "meeting space" which enables participants to meet with Canadians to exchange ideas would be well used

g) Language

- a major obstacle
- programs which enable immigrants to mix with Canadians is necessary in conjunction with the "immigrant only programs"

h) Other Issues

- this immigrant population tends to be in the 20 to 40 year age group which "weakens" it in the sense that there are no elders to provide human resources
- many are single with no children which makes meeting people harder

4. Recommendations to Advisory Council

- implement language intensive programs
- implement skill training intensive programs

**FOCUS GROUP SESSION
WITH
SOUTH ASIAN IMMIGRANTS**

COMMUNITY BASED NEEDS ASSESSMENT OF THE CORE AREA
FOCUS GROUP SESSION
WITH
SOUTH ASIAN IMMIGRANTS

The following organizations were contacted in identifying participants for this session:

- 1) Immigrant Access
- 2) Winnipeg Boys and Girls Club
- 3) International Centre
- 4) Immigrant Women's Association

There were four participants in this session. Three were from India and one was from Pakistan. All had lived in the core for a number of years.

1. All of the participants in this focus group resided in the core area. Reasons stated for how they came to live in there were as follows:
 - proximity to friends
 - access to housing
 - government located them here when they first arrived
 - proximity to government programs

2. Participants liked the following about living in the core area:
 - Indian food stores close by
 - proximity to entertainment
 - close to schools
 - eligible for more programs
 - programs help promote a sense of community and get residents out to meet one another

3. Participants disliked the following about living in the core area:
 - robberies
 - feeling unsafe
 - discrimination
 - Natives
 - police service poor
 - finding affordable housing

4. Issues

a) Abuse

- major problem in this culture
- security needed for women
- lack of support for separated females
- immigrants don't know how to access help
- the majority of counselling is geared towards women, but men need to be counselled too

b) Housing

- finding quality housing especially difficult for single parent women
- the RRAP program is a "rip off" for the homeowner

c) Employment

- discrimination
- lack of adequate paying jobs upon which one can live

d) Health Concerns

- appointments available only during the day; this reduces one's income as most are working for an hourly wage and don't get paid for time that they are away for such matters

e) Recreation

- cultural centre for this population is located in the Maples; difficult to access for core area residents
- program planners must recognize that different cultures have different definitions of recreation
- existing recreation is not geared for various ethnic communities
- immigrant women feel selfish spending time on themselves; their idea of recreation might be spending an evening sewing for their children
- women don't like having co-ed classes
- many recreational facilities require finances that most simply do not have
- more facilities for women only are needed

f) Services

- lack of coordination among programs
- lack of government assistance for single parents
- lack of empathy by social services
- lack of politeness by government employees
- unfair government programs
- lack of explanation of program eligibilities
- lack of evening daycare
- lack of visible minorities in training courses

- social service workers don't trust immigrant women
- there appears to be competition among the various programs

g) Age Specific Issues

- the children are not accepted into the Canadian culture because of discrimination, yet they are not accepted into the Pakistani culture either because they don't speak its language
- the middle aged are strained financially because their parents are living with them
- the elderly are lonely

h) Global Problems

- general inadequacies with immigration policies
- welfare abuse; the system promotes cheating
- many immigrants arrive with expectations that the government simply cannot live up to

5. Priorities

- increase appropriate and affordable housing
- coordinate services and increase dissemination of program information

6. Recommendations to the Advisory Council

- establish more outreach workers that provide one to one peer assistance and advice
- organize more public events/community meetings for core area residents in general; such events would provide both a social function and an opportunity for information dissemination
- increase training/work experience programs particularly for young people

FOCUS GROUP SESSION
WITH
SOUTHEAST ASIAN/INDO-CHINESE IMMIGRANTS

COMMUNITY BASED NEEDS ASSESSMENT OF THE CORE AREA**FOCUS GROUP SESSION****WITH****SOUTHEAST ASIAN/INDO-CHINESE**

The following organizations were contacted in identifying participants for this session:

- 1) Laos Association of Manitoba
- 2) Immigrant Access

There were three participants in this session. Two were from Cambodia and one was from Laos. The participants arrived in Winnipeg as newcomers from five to 10 years ago. The facilitator was from Vietnam and had arrived in Canada six years ago.

1. Participants liked the following about living in the core area:

- people keep to themselves
- lots of friends in the area
- too "quiet" in areas outside the core
- areas where there are no Natives
- close to movie theatres
- presence of other newcomers; some participants like the high density nature of ethnic communities
- some didn't like anything about the core

2. Participants disliked the following about living in the core area:

- landlords don't treat tenants well
- vandalism
- don't feel comfortable
- low resale price for housing
- theft
- lack of neighbourhood cleanliness
- buildings are crowded together
- Central Park crowded in summer
- lack of open recreational space
- Native community: vandalism; theft; young children running around
- Some disliked everything

3. Issues

a) Services

- participants generally said that people either are not aware of community services available to them or they just don't care
- the police service is grossly inadequate - slow to respond to calls; after a while residents take matters into their own hands

b) Housing

- poor quality
- "smelly"
- poor landlords
- lack of maintenance by landlord
- immigrants do not know how to approach a landlord to make a complaint

c) Employment

- only low wage jobs can be expected unless one has specific skills
- some expressed that they had no difficulty finding work as a garage attendant or pizza deliver; because the pay is low, however, many are forced to work more than one job
- many problems would be solved if more core area residents were gainfully employed

d) Education/Training

- not enough training that is directly tied to job experience
- dislike piecemeal work; would prefer a constant wage
- evening E.S.L difficult after working all day
- immigrants should have the opportunity to take E.S.L. before having to start a job
- immigrants expect a lot when they come to this country; they are not prepared for the difficult times
- immigrants with some education will have an easier time finding a job depending upon their area of study
- the E.S.L. program is very difficult for seniors

e) Health Services

- emergency units at hospitals are not quick enough
- discrimination in hospitals
- many tend to use traditional ways to cure ailments; purchase own treatments at ethnic shops

f) Recreation

- lack of recreation services downtown
- kiddie pools are overcrowded
- not enough open space
- many do not have time for recreation or socializing because they are working two jobs

g) Seniors

- watch television because they have nothing else to do
- want to be back in old country
- feel very isolated so they stay in the house; feel they have nowhere to go
- winter very hard; don't know how to dress
- lack of transportation
- the Indo-Chinese Elderly Club tends to be successful

g) Mental Health

- many are working two jobs which deteriorates one's mental health

4. Priority Issues

- housing
- recreation
- employment
- police services

5. Recommendations to the Advisory Council:

- establish an evaluation team that would monitor the condition of apartment units
- increase opportunities for newcomers to obtain "Canadian experience"; show newcomers how to go about getting a job
- increase orientation programs; provide more information regarding available programs and services
- improve safety in various areas; Neighbourhood Watch programs are not the solution
- insist upon collaboration among the various ethnic communities
- work more closely with existing community organizations
- provide more youth crisis programs
- increase the number of newcomer programs which help immigrants learn "Canadian ways"
- The CAI must recognize that this immigrant population distrusts services and will not apply for funding; the CAI, therefore, must increase its involvement in the community
- the CAI in general needs more visibility; it should implement a newsletter and do more community presentations
- the CAI should explain more clearly why proposals are turned down
- it must be remembered that working with one organization alone does not represent a community; contact should be made with all related organizations

FOCUS GROUP SESSION

WITH

LATIN, CENTRAL, AND SOUTH AMERICAN IMMIGRANTS

COMMUNITY BASED NEEDS ASSESSMENT OF THE CORE AREA

FOCUS GROUP SESSION

WITH

LATIN, CENTRAL, AND SOUTH AMERICAN IMMIGRANTS

The following community organizations were contacted in identifying participants for this session:

- 1) Immigrant Employment Assistance Centre
- 2) Immigrant Women's Employment Service
- 3) Immigration Access
- 4) Interfaith Immigration Council
- 5) International Centre
- 6) Chile Information Centre

There were nine participants in total. Four were from Nicaragua, three were from El Salvador, one was from Chili and one was from Sri Lanka. The participants had arrived in Canada (Winnipeg) from six months to two years ago.

1. Participants liked the following about the core area:

- access to programs/facilities
- transportation
- one family was in the process of moving into the core from St. Vital because there was little opportunity for accessing services in the suburbs

2. Participants disliked the following about the core area:

- noisy in the evenings
- polluted/dirty
- some areas very dangerous particularly those concentrated by Natives

3. Services/Programs Used

- Employment Centre Orientation Sessions
- International Centre
- Interfaith House

- in general these immigrants did not feel they had dealt with a broad range of services and/or programs; this occurs because: they are not fully informed as to what exists; agencies are overloaded; and there are few Spanish speaking service providers
- participants felt their ethnic group has had to, therefore, depend very much upon itself

4. Issues

a) Housing

- lack of support in finding housing
- if an agency did provide assistance, there was no follow up contact made after the first two weeks

b) Employment/Training

- as with housing there are few supports
- there tends to be more opportunities for men than women
- four month training/language programs do not make trainees competent enough to find work
- discrimination encountered when job searching; participants felt that they lacked the opportunity to show what competent/skilled workers they are; employers need to be provided with incentives to provide opportunities to newcomers
- training opportunities however are not the solution; this must be developed in conjunction with the creation of job opportunities
- employers abuse training programs; they lay off the employees once the subsidies are discontinued
- participants felt the human resources they had to offer was being wasted
- employers do not recognize the training and experience immigrants have earned in their own countries

c) Recreational

- there is little information provided as to what program/facilities are available
- facilities seem to be closed in the evenings
- existing services are often costly

d) Daycare

- lack of inexpensive daycares makes it difficult for women to work, look for work, or take training programs

e) Education

- young immigrants desire to continue their studies but they lack access to the education system; overcoming language barriers is one means of overcoming this barrier
- work/study opportunities are non-existent; participants desire more evening training programs so that they can work during the day

f) Language

- there needs to be more differentiation between English programs for professionals and those for untrained newcomers

g) Health

- lack of supports to introduce immigrants to the system; even simple things like making an appointment to see a health care professional is a foreign concept to newcomers

h) Overriding Issues

- there is a sense that the government is doing little for Latin, Central and South American newcomers
- participants recognize they are the latest wave of newcomers and it will take time before their needs are responded to
- this community feels there is a real sense of waste regarding their human resources
- it was felt that communities should be given their own resources to tackle their own needs
- this population recognizes that, because of internal conflicts in its' homeland, it has difficulty unifying and working together; if this could be achieved, however, the community could begin to address its own problems
- this population expressed a desire to learn "Canadian Ways"; it desires more interaction with Canadians and yearns to expose its culture and strengths to Canadians
- there is a need to increase the number of Spanish speaking service providers and paid community workers
- there is a strong need for widespread community development among this population before services can be administered
- the participants expressed a growing sense of frustration; they feel that service users and providers alike keep talking about problems but "nothing ever changes"

**FOCUS GROUP SESSION
WITH
RECENT IMMIGRANT YOUNG ADULTS**

COMMUNITY BASED NEEDS ASSESSMENT OF THE CORE AREA**FOCUS GROUP SESSION****WITH****RECENT IMMIGRANT YOUNG ADULTS**

The following community organizations were contacted in identifying participants for this session:

- 1) Chile Information Centre
- 2) Free Vietnamese Association of Manitoba
- 3) Interfaith Immigration Council
- 4) Laotian Association of Manitoba
- 5) Phillipine Centre
- 6) S.E.A.R.C.O.M.
- 7) Winnipeg Adult ESL Centre
- 8) Winnipeg Boys and Girls Club

There were seven participants in this session ranging in age from 16 to 24. Participants had arrived from: the Phillipines, El Salvador, Iran, Uganda, Ethiopia and Laos. Four of the participants had arrived as newcomers less than a year ago while three had been in Winnipeg a number of years.

1. Participants liked the following about living in the core area:
 - close to: services; hospital; transportation; community resources; support groups; friends
 - some said there was nothing they liked about the core

2. Participants disliked the following about living in the core area:
 - not enough free facilities; recreation and exercise is especially important to well-being of newcomers
 - financial problems/poverty
 - adjusting to new situation
 - unavailability of familiar foods

3. Participants used the following Community services in the core area:
 - International Centre
 - YMCA

4. Issues

a) Housing

- families living together creates overcrowding; is difficult for youth to deal with lack of privacy
- after the government supported housing program is over, finding adequate, affordable housing is difficult

b) Employment

- lack of job opportunities
- there is a need for more training programs
- it is difficult to land that first job when one has no experience, resume, or references
- only temporary employment is available
- lack of "connections" makes job searching even harder

c) Health Services

- mental health is affected by bouts of low self-esteem, paranoia and loneliness
- otherwise no problems: walk-in clinics are readily accessible; participants felt no peer pressure to take drugs or alcohol

d) Education/Training

- lack of money to continue studying
- degrees from other countries are not recognized here
- most programs tend to prefer Natives over other cultural groups
- the ESL program is too generic; a variety of programs should be offered depending on one's knowledge of English
- the six month education program only runs 4 hours per day; it is too short and needs to be complemented with additional activities
- training programs should be designed in conjunction with job experience

e) Recreation

- lack of financial resources to use existing services
- newcomers are not provided with enough information regarding who to talk to about what's available
- open spaces in the core are poorly maintained
- it would be useful to inform immigrants about recreation found elsewhere in Manitoba outside of Winnipeg
- programs and facilities are really lacking for young children

f) Native

- participants expressed concern for Native problems; they recognized there are many misunderstandings among Native and other cultural groups including themselves

- the participants asked why there were no Native youth at this session and when it was explained that a separate session had been planned for that group they suggested that this was a mistake, "we need to intermingle more with the Native population" they said

5. Priority Issues

- lack of employment opportunities
- lack of knowledge provided to newcomers

6. Suggestions for addressing needs:

- publish a simple English newspaper just for immigrants to provide an opportunity to practise English
- establish a central knowledge bank where information on services and programs is coordinated
- establish a multi-cultural resource meeting place where youth can learn about one another's culture
- organize loosely structured workshops where youth can meet and exchange ideas or learn about job interview techniques and resume writing
- increase extra-curricular activities like the ones that operate in conjunction with the ESL program
- increase the number of job training programs that are designed in conjunction with practical training experience
- require counsellors in the schools to describe the different post-secondary options that are available
- sponsor more sports activities
- establish a cross cultural "meeting place"

**NOTES FROM FOCUS GROUP
SESSIONS CONDUCTED WITH SERVICE PROVIDERS**

**FOCUS GROUP SESSION
WITH
MENTAL HEALTH SERVICE PROVIDERS**

COMMUNITY BASED NEEDS ASSESSMENT OF THE CORE AREA

FOCUS GROUP SESSION WITH MENTAL HEALTH SERVICE PROVIDERS

The following organizations were contacted in identifying participants for this session:

- 1) Adult Partial Hospitalization Day Treatment Program HSC
- 2) Canadian Mental Health Association (CMHA)
- 3) Community Mental Health Services (Manitoba Health)
- 4) Community Psych Nurse Program HSC (facilitator)
- 5) Day Psych Program Misericordia Hospital
- 6) Doray Enterprises Incorporated
- 7) Klinik
- 8) Manitoba Adolescent Treatment Centre
- 9) Sara Riel Incorporated
- 10) City of Winnipeg Parks and Recreation
- 11) Community Ministries
- 12) Misericordia Hospital
- 13) Society of Self Help
- 14) St. Boniface Hospital
- 15) Villa Vita

In total there were nine participants representing the first nine organizations listed above.

1. Number of service providers' clients who live in the core area:

- ranged from 50% to 90% or more

2. Reasons for high concentrations of this target group in the core include the following:

- group homes and resources are located here
- low cost rental accommodations are located here
- individuals from rural communities are attracted to Winnipeg because services are located here; once in Winnipeg they find accessing such services means living in the core for the reasons mentioned above. (For the elderly this becomes quite a difficulty as they do not know their way around.)
- the core tends to attract singles; the process of becoming disconnected with one's family begins and those with some mental health difficulties may then find themselves in need of services

- many with mental health difficulties may find that they are more comfortable **'surviving'** in the downtown

Many of the organizations desire to relocate outside of the core because their clients wish to live and/or access services in safer areas. St. Boniface and Seven Oaks are popular areas because they are removed from the downtown but are close to hospitals.

3. Issues:

a) Housing/Welfare

- welfare will not cover cost of accommodations located outside the core
- because housing which is affordable is in poor condition, many clients move frequently; this results in a poor housing history and makes it even more difficult to secure adequate housing
- the mentally-ill may become stigmatized by landlords and may be evicted on causes which would be considered minor for any other tenant
- because there are so few supports, the clients spend their meagre welfare cheques immediately and then may not have enough money left to cover housing
- it was suggested that welfare money may be less difficult to budget if it were issued every two weeks rather than once a month

b) Group/Care Homes

- smaller homes work better because they allow for more interaction with the care providers
- the physical condition of these homes is important; clients seem to improve when there is an improvement in their physical environment
- many Filipinos run group homes because they are a caring group of people; there is very little money in the business

c) Emotional/Intellectual Skills

- too many of the programs are based on developing "physical skills" (such as housekeeping and personal maintenance) rather than on "emotional" or "intellectual skills" (such as budgeting)
- there needs to be more supports which provide pleasure for clients and empowers them to make their own decisions; empowerment is provided by welfare stipends but the sense of control is very short lived

d) Social Interaction

- clients need a "place to go"; often clients have nothing to do during the day so they sleep and then watch T.V. into the early morning
- many clients get more out of socializing than any other types of programs
- there is a need for more loosely structured programs which provide the element of choice

- clients need to have freer access to existing programs both for the mentally ill as well as for the non-ill; many clients show vast improvements when they have socialized with the non-ill

e) Recreation

- there is a shortage of physical activity programs
- many community organizations are more than willing to provide use of their facilities; the problem lies in funding a body to facilitate the use of existing services
- the U of W Community Program was cited as a well used and received program

f) Transportation

- only the Society of Self Help provides some form of transportation; Klinik also picks up and brings people to their drop-in session Wednesday afternoon
- there is a need to bring some of the counsellors to the clients' homes to ease the need for transportation
- the various programs are very segregated; increased transportation would facilitate the use of such programs
- program providers, however, do recognize that this is a "real world" and people must learn to get around; some clients, however, are simply incapable of this.
- often times, the emotional rewards of using public transportation and of participating in an activity at the destination can help the client overcome fear of using public transportation.
- it would be extremely helpful if the City could arrange for distribution of bus passes to a number of individuals

g) Employment

- for many non-elderly, employment is paramount to well-being; it addresses the lack of financial means most are faced with and enhances ones sense of identity
- vocational skills are really only available at Doray
- employment, however, should not be overemphasized as not all clients have the ability to work and other satisfying activities must be offered
- program Beam at Klinik was cited a number of times as being an excellent program; the program helped post-psych patients acquire employment through one-on-one assistance with a community worker. The worker would spend a portion of the day with the client on the job site. Employers were less reluctant to hire such individuals because they knew there was back-up support by the Klinik worker

h) Seasonal Implications

- winter is definitely a more difficult time for individuals with mental illnesses: shorter days mean the issue of safety arises more frequently; there is a need for warm clothing and transportation but little money to secure either; it is more difficult to find odd jobs

i) Relationship Building Between Services

- though there is a definite need for more options in programming, there is a great need to strengthen the relationships between various existing services
- co-ordination and community planning among the various agencies is not occurring at an adequate level; CMHA attempts to address this but does not have the resources to undertake this task adequately

j) Advocacy

- family and agency advocacy has been responsible for many improvements in the area of mental health
- families and agencies have made funders realize that an 8 hour a day program is a lot cheaper than 24 hour a day hospital care

4. Youth Issues:

- obtain a recent Needs Assessment by CMHA and Co-Caps (Child and Adolescent Psychiatry)

5. Non-Core Issues:

- though the needs of the mentally ill are the same outside the core as in the core, they are not as observable nor severe

6. Other Services:

- in addition to the services provided by the organizations represented by focus group participants, other key organizations which provide vital services were mentioned. These included: City and Provincial Welfare; organizations that support soup kitchens and clothing depots; churches such as Westminster United; and the Society of Self Help. The latter provides some vocational training and a co-op housing program.

7. Recommendations to the Advisory Council:

- it is extremely important to recognize that the mentally ill population is one of great variety with varying needs; one focus group participant, for example, noted that his lowest level functioning client was the highest functioning client of one of the other focus group participants
- it should be recognized that mental health programs face difficulty in securing on-going funding; the Council, therefore, should be willing to support short term programs

- some disappointment regarding the low level of activity the C.A.I. has had in the area of mental health was mentioned
- the chronic ill, who are the most fragile and who are in and out of the hospital because of lack of interim supports, should be the top priority in terms of funding
- at the same time, however, it should be recognized that there seem to be more funds available for the acute ill than those with fewer difficulties
- the Council should fund innovative programs that offer something different from other organizations
- more day programs are needed
- proposals which are directly attached to client care support as opposed to a research based proposal should be funded
- programs which help people become more successful in their present state should be funded; these programs would provide more front-line workers and individualized care to promote growth; it was suggested, for example, that the five worst clients at a program be provided with individualized care
- more loosely structured programs such as a "psycho/social clubhouse model" should be funded. This model involves residential, employment and social programs tied into one; throughout all programs there is continuous support
- though the participants did not presume that the members of the Advisory Council have not been touched by someone with mental health difficulties, it was suggested that the Council would become most attuned to the needs of the mentally ill by spending a day with a service user; the session facilitator would be most willing to arrange this

**FOCUS GROUP SESSION
WITH
SENIOR SERVICE PROVIDERS**

COMMUNITY BASED NEEDS ASSESSMENT OF THE CORE AREA**FOCUS GROUP SESSION****WITH****SENIOR SERVICE PROVIDERS**

The following organizations were contacted in identifying participants for this session:

- 1) Age and Opportunity Centre, St. Boniface/St. Vital
- 2) Age and Opportunity Centre, Main Street
- 3) Age and Opportunity Centre, Selkirk
- 4) Age and Opportunity Centre, Smith Street
- 5) Community Home Services
- 6) Creative Retirement Manitoba
- 7) Clinic, Inc.
- 8) Lions Club of Winnipeg Housing Projects
- 9) Manitoba Society of Seniors
- 10) Northwest Winnipeg Cooperative Community Council
- 11) Department of Health, Winnipeg Region
- 12) Age and Opportunity Centre, West End
- 13) Federation des Aines Franco-Manitobains
- 14) Indian and Métis Friendship Centre
- 15) Ma Mawi Wi Chi Itata Centre (Winnipeg) Inc.
- 16) Kikanan
- 17) New Horizons
- 18) Manitoba Council on Aging
- 19) Victoria Order of Nurses

Service providers from organizations one through eleven above were represented at the focus group. Participants included front-line workers (e.g. nurse, social worker), administrators/coordinators, and those who fill both roles. The seniors that the service providers dealt with varied in age and occupied a variety of housing types - EPH's, apartments and their own homes. Few of the participants in the session dealt with Natives or immigrants.

Focus Group Session**1. Reasons seniors live in the core area:**

- many have always lived there
- elderly persons housing is located there
- some gravitate towards the core because services are located there; many seniors feel that downtown "is the place to be"
- seniors in St. Boniface have always lived here or have moved in from French speaking rural areas; they do not consider themselves to be part of the "core area" or in some instances part of Winnipeg period

2. Number of service providers' clients who live in the core area:

- ranged from 40% to 100%

3. Difficulties seniors face in accessing services:

- many seniors feel that they "don't belong"; tend to be "class conscious" i.e., drop in centres located in high-rises may appear too "posh" for some
- some don't want to be associated with "seniors"
- seniors require "advocates" - a resource which is not always available to them; they feel they will have better results accessing a service if someone calls on their behalf
- they lack education and "know how"
- service providers (doctors for example) are often poor at dealing with seniors
- some services lack visual visibility, e.g., if they are contained within a larger block
- access to transportation often limited
- income levels often prevent seniors from accessing services because they are over or under program cut-offs

4. Additional Problems

- lack of cooperation among various services and programs
- lack of continuing care; seniors not adequately monitored once they are cut off from home care
- lack of adequately trained counsellors recognizing that dealing with seniors requires time
- lack of human resources
- seniors' mind-sets pertaining to financial matters: some do have money but won't spend it because they have only ever known how to save; others are uncomfortable spending money on themselves

5. Immigrant Seniors

- have difficulties accessing health services because of language barriers
- often only participate in programs if they have a problem; not wide users of programs on a general basis
- want to take English programs, but cannot participate in classes held weekdays because they are often babysitting their grandchildren
- require fewer "basic" services (transportation, home maintenance) because often they reside with their children
- the following issues were raised specifically in relation to Laotian women living in seniors centres: face depression; find the climate harsh; feel neglected by their own children; feel doctors discriminate against them; lack confidence in therapists' skills

6. Identification of Needs

a) Socializing

- seniors desire people around them for socializing and safety
- providers still hear seniors say "I am lonely"

b) Assistance with Meals

- have difficulty obtaining groceries
- don't feel like eating any more
- find shopping expensive
- many of the smaller grocery stores are pulling out of a number of neighbourhoods

c. Housing

- desire units with separate bedrooms; do not find bachelor suites suitable
- elderly persons housing needs to be more enriched; this is particularly crucial in the core where many blocks offer shelter only
- when housing related programs are designed it should be remembered that the seniors under 70 years and those over 70 don't mingle

d) Lack of Programs for Men

- while most suggested there have been improvements made in the services offered for men, others tended to feel this groups has been neglected
- programs that have been successful with men are very loosely structured

e) Services

- home care services are inadequate
- there is a need for more individualized services
- coordination among services: if duplication were eliminated, more would get done; community councils such as Northwest Winnipeg Cooperative Community Council and the one presently being formed in St. Boniface are making improvements in this area

f) Transportation

- there was disagreement regarding the suitability of specialized services such as Handi-Transit; some felt needs were being met while others felt they were not

g) Education

- a central "call in place" where one could obtain all the required information would be widely used; it was recognized that MSOS (Manitoba Society of Seniors) and A & O (Age and Opportunity) presently provide some information coordination, but they are not fully prepared to do intake service and there is a lack of trained staff to deal with seniors
- education is also required to "prepare" individuals to become seniors and to assist them during the transition period to retirement

- providing seniors with a better understanding of various cultural groups would help break down numerous barriers

h) Health Promotion

- particularly in demand by younger seniors

i) Language

- for immigrants, the ESL programs must be more closely tied to a specific need - for example, to fill out a medical form

j) Safety/Security

- increasingly service providers are hearing seniors say there is a need for this

7. Recommendations to the Advisory Council

- funding priorities should be made for projects or demonstration projects that are going to continue after C.A.I. funding ceases
- it is crucial to recognize that seniors are a very diverse group with varying needs and that the level of networking among service providers varies considerably
- two specific projects were suggested: a pilot project which provides for a live-in nurse in an elderly persons housing project; and the design and implementation of a system for coordinating facilities and programs

**FOCUS GROUP SESSION
WITH
CHILDREN AND YOUTH SERVICE PROVIDERS**

COMMUNITY BASED NEEDS ASSESSMENT OF THE CORE AREA**FOCUS GROUP SESSION****WITH****CHILDREN AND YOUTH SERVICE PROVIDERS**

The following organizations were contacted in identifying participants for this session:

- 1) Child and Family Services, Central
- 2) Child and Family Services, Eastern Region
- 3) Child and Family Services, Northeast Region (New Faces)
- 4) City of Winnipeg, Social Services Department
- 5) Province of Manitoba, Economic Security Division
- 6) Rossbrook House
- 7) Beat the Street
- 8) Boys and Girls Club of Winnipeg
- 9) Broadway Optimist
- 10) CEDA (Community Education Development Association)
- 11) Child and Family Services, Northwestern
- 12) Ma Mawi Wi Chi Itata Centre
- 13) Phillipino Association of Manitoba
- 14) Pritchard Place

The eight participants in the session represented organizations one through six above.

1. Number of service provider's clients who live in the core area:
 - for the organizations which operate only in Winnipeg - the majority to 100%.

2. Reasons clients live in the core:
 - rooming houses and regional housing is located here; larger housing units are located here which accommodate extended families
 - migration from rural areas
 - families don't feel as discriminated against in schools and communities in the core as they would in other neighbourhoods

3. Things clients like about the core:
 - affordability
 - comfortable
 - housing and transportation is accessible
 - the homogeneity of various neighbourhoods: for example, the Vietnamese "pocket";
 - residents use one another as resources
 - socially, it is more acceptable to be unemployed

- it was noted, however, that a lot of people don't realize they live in the core area, rather they live in a neighbourhood with a real "sense of community"

4. Things clients dislike about the core:

- landlord issues: lack of maintenance; inaction regarding tenant requests; sexual harassment
- the management of Regional Housing; many would prefer to live in inferior housing than deal with this organization
- employment frustrations

5. Issues

a) Employment

- the Community Home Services model works well
- youth do not know how to work or how to keep a job; they have a lot of expectations even though they have no skills
- training programs neglect to teach how to be dependable and reliable or how to take directions; employees are looking for reliable, conscientious persons who can take orders
- there are no incentives to get off welfare
- training programs often provide short notice to those participants selected which makes finding daycare difficult
- training programs should channel trainees into a \$5 to \$6 per hour paying job initially, so that after a period of time the trainee would want to look for something better
- training programs tend to miss the young unemployed youth who've only ever worked two months
- employers tend to want only the "cream of the crop"; employers who are willing to continue to rehabilitate employees once they are hired are needed
- more money should be put into creating work opportunities

b) Daycare

- tends to be too structured, which does not meet the needs of families, particularly single parents in the core; flexible daycare available on short notice and for short periods of time is needed

c) Welfare System

- the system is central to many problems facing core youth
- teaches youth to live for today; rather than enroll in a training program that might secure a minimum paying job, youth would rather stay on welfare and look for a \$6/hour paying job

d) Recreation

- organized sports in community centres is not appropriate for this population; more loosely structured programs are needed

- more drop-in centres are needed; Firescape in Elmwood is successful because of its relaxed, unthreatening atmosphere, and counsellors are present if youth desire someone to talk with
- group activities are important; once one or two key people are reached, the rest follow
- there are few recreational areas for children and youth in St. Boniface; recreation is geared more towards the middle class than the lower income, where there is not as much parent and volunteer support

e) Health

- Broadway Walk-in Clinic tends to be very well used
- many families lack continuous medical histories for their children and continuity in care because they move from one clinic to another because they may have something to hide, e.g., evidence of neglect
- mental health deteriorates as a result of economic situations
- more support for pregnant teenagers and young mothers is needed

f) Life Skills

- many youth lack basic education skills such as the ability to read and follow directions, or the ability to establish healthy relationships
- youth lack self-esteem

g) Housing

- need for more independent living programs which teach youth that they can cope on their own and build self-esteem
- overcrowding results in children witnessing a lot of sexual activity among parents; they have no sense of privacy or boundaries

h) Counselling Services

- because the need is so great there is a very large gap in the provision of this service
- services that are provided are focused more on the crisis model
- despite the existence of some very apt services, waiting lists are long; some services won't even compile waiting lists any longer
- services need to be more locally based; reaching the "leader" of a group of youth tends to influence the remainder of the group

6. Priority issues are:

- life skills
- counselling services

7. Core versus non-Core needs

- needs in the core are much more basic; at age four, children are learning basic survival skills and are focused upon day to day existence rather than planning for the future

8. Recommendations to the Advisory Committee

The following priorities should be supported:

- programs: abuse treatment; prevention groups; parenting groups, particularly for teenage mothers; safehouse for runaways
- human resources: family support workers; community outreach workers; advocates (parents aren't doing this and service providers don't have time to assume this role)
- financial resources: to allow children and youth to access existing recreational services; to create work opportunities
- daycare of a flexible nature
- training programs such as: a progressive program, i.e., that guides a person through school and then a series of increasingly higher paying jobs; or a program geared toward unemployed youth who've only ever worked for two months; or a program modelled after the Community Home Services Model

**FOCUS GROUP SESSION
WITH
SINGLE PARENT SERVICE PROVIDERS**

COMMUNITY BASED NEEDS ASSESSMENT OF THE INNER CITY
FOCUS GROUP SESSION
WITH
SINGLE PARENT SERVICE PROVIDERS

The following organizations were contacted in identifying participants for this session.

- 1) Children's Home of Winnipeg
- 2) Elgin Parent Child Centre
- 3) Elmwood Parent/Child Centre
- 4) Ikwe Widdjitiwin
- 5) North End Community Ministry
- 6) North End Women's Centre
- 7) Women in Second Stage Housing
- 8) Ellice Parent/Child Centre
- 9) Ma Mawi Wi Chi Itata Centre
- 10) Native Women's Transition Centre
- 11) Osborne House
- 12) Pinkham Parent/Child Centre

There were seven participants in this session representing the first seven agencies listed above.

1. The majority of the agencies indicated that 90% - 100% of their clients are core area residents. Two agencies indicated that approximately 50% of their clients were from the core area.
2. Clients came to live in the core area for the following reasons or circumstances:
 - they were born in the inner city and continue to live there
 - come from the North and moved in with family and friends who live in the core
 - choose to live there because the social milieu is comfortable to them; friends live there, others are in similar situations
 - move from other provinces
 - live there to take advantage of social programs that are offered or to be involved in community-based schools
 - move from various suburban areas of the city or from rural areas into the inner city
 - an interesting aside: many of the users who identify themselves as core area families have been transferred to subsidized housing in St. Vital, Transcona, Shaughnessy Park, etc. In many instances, these families still travel to use the core area services.

3. Many users feel comfortable in the core and don't plan to move. Another group, perhaps 30% plans to move eventually to a more stable, tranquil neighbourhood.

Participants indicated their clients liked the following about the core area:

- social milieu
- able to cash cheques at the corner store
- Winnipeg Regional Housing
- the schools
- lots of services concentrated in the area so they can easily access them
- accessible to clothing depot; food banks

Participants indicated their clients disliked the following about the core area:

- housing: not enough regional units
- slum landlords
- landlords who charge maximum allowable rent for "dives"
- lack of affordable, decent housing
- violence on the streets; lack of safety for women and children
- very few play areas for children, lack of playgrounds and shortages of green spaces (parks)
- lack of large food stores

4. In addition to those which the participants represented, clients used the following services within the core area:

Legal Aid	Community Ministries
Health Sciences Centre	Manitoba Anti-Poverty Association
Community Clinics	Rossbrook House
Regional Housing	Pritchard Place
CRISP/SAFFR	Women's Employment Centre
Social Assistance	Clothing Depot
Osborne House	Parent/Child Centre
Child & Family Service	Food Banks
Immigrant Access	Day Cares
Swimming Pools	

Clients have used the following Community Services outside the core area:

Fort Garry Women's Resource Centre
 Single Social Allowance
 Single Parent Job Access
 Lindenvue
 Opportunity Centre

- clients use services within walking distance, or stable bus route
- people connected to the child welfare agencies stay in the core

- clients fall into two categories regarding services: one group is familiar with the whole range of services in the community and makes use of them; the other group is extremely isolated and has not heard about, or used, many services

5. Clients have encountered the following problems while accessing:

a) Housing

- if decent housing is located, it may be far from family, friends and services
- long waiting lists for regional housing
- social assistance won't cover damage deposits; clients must find their own funds
- social assistance makes clients find a place before it is approved; by the time it is approved, the place is taken
- there is discrimination against tenants in terms of sex, age, marital status, number of children
- there is no assistance given to find a place when one has limited resources; with no tools to find a place, people generally stay in the same area
- the "buck" is "passed" between levels of government; no one wants to take the responsibility of changing the system

b) Employment/Education/Training

- minimum wage is too low to survive on
- training wages are too low for single parents
- there should be part time training programs which allow families to gradually phase into working schedules
- employment is scarce; jobs are menial and employers are harsh
- women are still being encouraged to accept traditional low-paying, dead-end jobs.
- in order to find employment one needs: a good education, physical/mental/spiritual health; self-esteem
- women struggle with supplying basic necessities; it is very hard to have a sense of well-being when children are less healthy because one is poor; women miss more days from work due to sick leave; their income is reduced
- available day care runs from 9:00 a.m. - 5:00 p.m.; most available jobs fall outside of this time frame
- native women are skeptical about day care; usually family is involved in Native culture
- more non-Natives are in training programs because they:
 - a) use birth control;
 - b) may terminate a pregnancy;
 - c) see day care as more acceptable
- women see economic independence as being important in leaving or staying away from an abusive relationship
- there is need for more programs developing life skills programs, literacy, and self-esteem
- pregnancy, not inability, is the basic reason why women drop out of high school
- schools are not sensitive to the needs of single mothers
- schools are not good at sharing information about contraceptives
- employment at a wage of \$4.90 per hour, then paying all expenses, dental, etc., takes away incentive for working

- urban life is more foreign to Natives than to immigrants
- training programs are of one-year duration which allows for only a minimum wage job; there are few spaces available in two-year training programs which provide job opportunities for more secure, better-paying positions
- only social assistance recipients have access to training programs
- lack of supports complicates the successful completion of a school program
- women or men who are single parents, or even couples who are both working, need an extraordinary amount of support to complete a training program; poverty and domestic violence, combined with weariness, wear down program participants

c) Health

- traditional approach to women's health problems is a big hurdle to overcome; many are placed on drugs needlessly
- lack of recognition of women's health issues by doctors is a major issue
- unnecessary removal of the womb occurs

d) Recreation

- it is difficult to access the few existing recreation opportunities
- the burdens of daily life and the constant fatigue affect ones health. Many women express the desire to take aerobics, play sports or get their kids into lessons or sports, but lack of money, transportation, and babysitting and an abusive, controlling male in the home prevents them.

6. Gaps in Services

- under-funding of services: not enough staff and spaces to meet the needs
- lack of communication to general public; most people are not aware of the services available to them
- lack of networking, communication, information among agencies
- services to women are absolutely crucial to a healthy family
- preventive programming is not always measurable in statistics that bureaucrats can understand; as such, these programs are not funded
- flexible day care is a grossly lacking; many users are prevented from using services due to lack of day care and transportation
- the largest gap is support for women in abusive relationships: their participation in events is often hampered by their fear of the man they are living with
- most women are reluctant to disclose facts of their situation to anyone at a mandated agency for fear they will be blamed or their children will be taken from them
- most support services are for battered women
- huge need for outreach into the community to take information to women and children who need it
- gaps in services for abusive males also
- there is need for more flexibility in social assistance programs

7. Priority for funding would be to provide more support for abused women in terms of:
 - 1) support that develops self esteem, awareness
 - 2) flexible day care
 - 3) transportation
 - 4) decent housing in neighbourhood that is comfortable for the family, near supports
 - 5) education/training
 - 6) employment
 - 7) recreation

8. Criteria the Advisory Council Should Use When Making Funding Decisions:
 - consider the impact of the program
 - improve day care services; improve the health of the child
 - improve education prospects; improve mother's situation
 - recognize that it may not always be possible to evaluate programs in the sense of statistics; this should not be a priority with funders
 - look at coordination of existing services
 - core should provide resources to assist organizations to secure long-term funding
 - address the need for long-term funding

9. Suggestions for the Planning of Other Focus Groups:
 - more time allotted
 - conduct in the morning
 - conduct in a different environment
 - as many high-need Core Area residents are reluctant to come out to any group, target groups could be sent questionnaires through outreach workers, home visitors from schools, ethnic aids in schools and many others who have access to community residents. These workers have worked hard to establish trust with families. These valuable lines of communication are often overlooked.
 - the biggest frustration as a Core Area Worker is the sense of not being listened to; despite service provides contact with and understanding of the needs of target groups funders (government) don't address the needs they have identified
 - several users and service providers have commented that they are tired of surveys, questionnaires and committees. The needs are there yet money is still being spent to investigate the problems!

**FOCUS GROUP SESSION
WITH
NATIVE SERVICE PROVIDERS**

COMMUNITY BASED NEEDS ASSESSMENT OF THE INNER CITY**FOCUS GROUP SESSION****WITH****NATIVE SERVICE PROVIDERS**

The following community organizations were contacted in identifying participants for this session:

- 1) Aboriginal Women's Justice Committee
- 2) Aboriginal Women's Network
- 3) Ike Widdjitiwin Inc.
- 4) Indian Family Centre
- 5) Indian Métis Friendship Centre
- 6) Manitoba Indian Cultural and Education Centre
- 7) Native Employment Centre
- 8) Winnipeg Native Family Economic Development
- 9) Anishinabe R.E.S.P.E.C.T.
- 10) Ma Mawi Wi Chi Itata Centre
- 11) Native Alcoholism Centre
- 12) Urban Indian Association
- 13) Winnipeg Council of Treaty and Status Indians

There were nine participants in this session representing the first eight organizations listed above.

1. The majority of the agencies' clients are core area residents.
2. Some people say they want to stay here. However, as more low-cost housing projects are developed outside of the core and people are moved away from this area, they no longer are able to access much needed social services/training programs due to residence requirements; children face problems, such as discrimination, in non-core schools.
3. Participants/clients encountered the following problems when accessing services pertaining to:
 - a) Housing
 - there is a definite need for more affordable, decent housing for Natives in the core area; many people want to live downtown close to services
 - there is a need for more Native-operated housing co-ops
 - there is need for more services providing spiritual assistance

- native people are very transient between the reserve and the city due to employment/training/education/health needs; there is a great need for services that reach people when they first come into the city or request assistance; this will alleviate some migrancy and crisis situations
- there is a need for reserve and Métis communities to prepare incoming people to urban-communities; orientation programs needed

b) Social Services

- need for more preventive services
- need for a community-based child and family service
- many issues affecting communities' ability to focus energy on common needs
- numerous people "slip through the cracks" and a multitude of needs go unmet; there is a need for a service that is open 24-hours a day that can make appropriate referrals
- need for professional community to work together
- need for services that enable the target groups to provide their own solutions; services that enable people to become better equipped to deal with issues
- need for more holistic programs that allow development of spiritual component
- there is a lack of mental health programs; "Flying On Your Own" was cited as a good program
- native women's organizations do not have a lot of resources in the way of basic staffing; services are developing, but slowly
- self development is a priority in Native women's organizations
- two to three years ago information dissemination was identified as a high priority due to lack of available information regarding resources; the suggestion was made to publish a newspaper once a month but funding could not be secured
- need for a facility where a women's services may group under one roof

c) Employment & Training

- lack of program for women in the area of self-development/awareness programs
- lack of child care resources for mothers or fathers for short-term (job interviews, etc.) and long-term situations; parents depend too often on friends, relatives
- training/education programs lacking; not enough spaces available. As a result, those organizations implementing employment equity are not able to fill positions due to the lack of appropriate applicants
- CAI has done some short-term projects; some of those people are working
- if employment is found, housing, social services and training becomes less of a problem
- when Native people move to the city they go to an agency where they have connections, i.e., staff from their particular reserve; therefore there is a need for good representation of reserves on staff
- need for orientation for Northern Native students coming to Winnipeg
- need for information dissemination: 1-800 lines, fax lines, video, and media could be used
- use evening hours of TV programming to inform people of services available: cost factor recognized
- communication of information becomes an important key to use of services; and Native people's ability to adjust

4. Participants indicated that youth have numerous needs. Many are responsible for looking after families; training/education and employment needs are different.
 - native males' needs vary
 - many older males don't fit into existing programs; skills don't fit
 - with so much unstructured time, loneliness is rampant; people are looking for something meaningful. Within the city there are not many agencies that deal with this loneliness. People are not always looking for employment or recreation. There is a need to define what people see as "meaningful" and to meet their needs. There is a need for volunteer programs that enable people to plug-in where they can.

5. Participants indicated that besides a lack of safety and good school programs there were very few differences between core and non-core areas.

6. Gaps in services were identified as a lack of various forums to communicate the range and type of services available to the people who need them. In addition:
 - lack of networking between agencies
 - there is a big gap between people who need services and those actually availing themselves of services
 - gaps in self-improvement programs
 - lack of appropriate housing
 - lack of spaces in education/training programs
 - lack of recreational programs
 - currently, Native people make up approximately ten percent of the community; agencies, and businesses should reflect this in their staff complement; this needs to be addressed by all levels of government; the construction industry is one area where more balance is needed

7. In order to make funding decisions one needs to know priorities:
 - CAI should run pilot projects before more permanent funding is supplied, to make sure program is workable before one- to two-year funding is approved

8. Focus groups should be set up where the people are: coffee shops, etc.

**FOCUS GROUP SESSION
WITH
SERVICE PROVIDERS: IMMIGRANTS**

COMMUNITY BASED NEEDS ASSESSMENT OF THE CORE AREA

FOCUS GROUP SESSION

WITH

IMMIGRANT SERVICE PROVIDERS

The following organizations were contacted and participated in this session:

- 1) Adult and Continuing Education
- 2) Boys and Girls Club
- 3) Immigration and Settlement Branch/Immigrant Access
- 4) Immigrant Women's Association of Manitoba, Inc.
- 5) Immigrant Women's Employment Service
- 6) International Centre
- 7) Manitoba Interfaith Immigration Council
- 8) Planned Parenthood Manitoba, Inc.
- 9) St. Matthew's-Maryland Community Ministry

As Planned Parenthood was unable to participate in the focus group session but desired to be included in this process, this organization submitted the information outlined in Part II of this session.

Part I: Focus Group Session

1. Number of service providers' clients who live in the core area:

- ranged from 50% to 100%
- it was clarified, however, that all immigrants will face similar problems regardless of where they live; unfortunately, some immigrants can't access core area services because they don't live there

2. Reasons high concentrations of immigrants live in the core:

- accessibility to: services; low cost housing; friends; transportation; shopping; daycare; schools; ethnic groups
- forces of circumstances
- service providers lead new immigrants to an "informal choice" regarding the suitability of their first accommodations upon arriving in Winnipeg; when the newcomers decide to move, they do so independently, but most will remain in the core
- high level of comfort due to abundance of community organizations
- E.S.L. is only offered by School Division #1 which operates in the core
- newcomers not locating in the core may have: been sponsored by family members living in the Maples, or Fort Richmond and will, therefore, establish themselves there; consciously chosen not to live in the core because they prefer to have their children attend school with no E.S.L. programs so that their children are not taken away from regular activities to participate in E.S.L. activities

3. Service providers' clients dislike the following about the core area:

- poverty
- lack of recreation
- unsafe; that the core is a violent community is a common perception
- many will stay in the core even if they don't like it because they lack transportation means; the concept of commuting to work is a foreign one
- immigrants are no different than the mainstream population: the core fulfills their needs as singles and couples, but once families have school age children, they desire to leave the core

4. The service providers' clients use a broad range of services and programs including those represented at the session and:

- Core Area training and employment programs
- Adult E.S.L.
- Applied Linguistics
- Winnipeg Regional Housing
- Shelter Allowance
- City and Provincial Welfare
- Child and Family Services
- Health Science Centre
- Legal Aid
- Daycares
- Calvary Temple
- St. Matthew's Maryland Community Ministry and other church organizations
- the Downtown YM/YWCA
- Age and Opportunity Centre
- Canada Employment Centre
- Society of Manitobans with Disabilities
- Mt. Carmel Clinic, Village Clinic, and other public clinics
- Public Health Nurses
- Ethnic Organizations
- University of Manitoba Dentistry Dept.
- Industrial Training Centre (located outside the Core)
- Winnipeg Education Centre (located outside the Core)

5. Issues

a) Housing

- slum landlords: do not respond to maintenance requests; discriminate against tenants, e.g., they will contact the police and wrongly claim that a particular unit was having a loud party (when the police arrive at the units the tenants are left afraid and shaken)
- lack of education regarding their rights and what to look for and inquire into when looking for a place to live
- lack of affordable housing, especially for an abused woman with a child who is attempting to live on her own
- overcrowding occurs when families sponsor other families

- the government sponsored housing which newcomers are first entitled to during their first year is fairly generous; once the year is up, however, the newcomers have to find another place and they don't realize how difficult it is to find affordable, adequate housing
- lack of availability and accessibility to housing stock; there is a need for a central housing registry to outline all options available
- overcrowding occurs as there are few three or four bedroom units which are required of immigrant families which tend to be large
- lack of affordable family housing
- welfare programs continue to compound housing problems because they continue to pay a good dollar for "crap" housing
- some use their food money to put towards their rent
- it was cautioned, however, that these two latter concerns were not major issues as most immigrants are not on welfare

b) Employment/Education

- the highly qualified cannot find work
- there seems to be a lot of services for women but fewer for men
- lack of job opportunities
- lack of assistance in finding a job
- lack of understanding that approval of one's VISA doesn't mean that a job will be awaiting the immigrant upon arrival in Canada
- lack of programs geared towards the highly trained and/or educated immigrants
- there is need for more appropriate E.S.L. programs for these people; those with knowledge of English resent being placed in the same program as those with no knowledge -they feel they are being held back and are bored
- accreditation problems - lack of recognition of diplomas received in other countries; there is a need to work with regulatory bodies
- lack of training programs for semi-skilled immigrants; for example a welder of 20 years should not be required to start at the beginning of a full year training program, rather a briefer course that supplements his skills should be available
- discrimination in hiring - it is not always the employer who is discriminatory, rather he is concerned about the reaction he will receive from his existing employees
- reverse discrimination occurs as well because employers know immigrant populations tend to work hard and say nothing
- there is a need for affirmative action programs which tie into employment opportunities suitable to their capabilities
- it is difficult for clients to "walk through our system"; filling out a job application presents difficulties
- pressure is placed on children to go to work to contribute to the family income
- lack of understanding by the employers of different cultures and values
- there is a need for more:
 - focused outreach programs
 - non-profit agencies, such as the Winnipeg Boys and Girls Club, to assume advocacy roles and bring clients into the "system"
 - long term (such as 4 years) programs

c) Health

- lack of support to encourage clients to continue to use services
- the health care system views immigrants as a low priority; it does not adequately inform this population of what they are eligible for

- health care professionals lack specialized language, communication, and human skills as well as cultural awareness
- need for more privacy/anonymity in accessing services for particular needs; a woman must reveal, for example, that she is battered by the very fact she has arrived at a particular building; generic services, however, are not easily accessible to immigrants (One solution for this is a community based system that doesn't focus upon a particular problem or ethnic group)
- need for more trained interpreters

d) Recreation

- there are few recreational facilities and those that are established are expensive to use
- some participants felt there was no recreation in the core; others disagreed and pointed out that City Parks and Recreation has a budget of \$150 million/year - the problem is that their services simply aren't accessible, i.e., they don't market their programs, but wait for users to approach them; i.e. they lack sensitivity to immigrant needs
- increased need for after school and summer programs
- the definition of recreation needs to be re-examined for these groups
- for many of these cultural groups, recreation is not viewed as a priority

6. Priorization of Issues

- the focus group participants had difficulty prioritizing the issues they outlined because they suggested they are all so inter-connected; nevertheless many problems stem from the employment/education issue

7. Recommendations to the Advisory Council

- increase participation of the inner city populations in terms of program design and delivery
- increase the number of culturally and linguistically appropriate staff
- discontinue "short term fixes" but instead fund longer term initiatives
- force collaboration among service providers
- fund only holistic/global approaches, i.e. training programs should not be funded unless consideration has been given to other factors such as problems with the E.S.L. and welfare program
- discontinue funding of short term pilot projects - or else build long term funding into these projects
- discontinue mega projects such as Portage Place and the Forks; they neglect the human component for the bricks and mortar approach
- recognize that immigrants just want to be independent
- fund more courses like the CAI's "English for Special Purposes".

8. These service providers responded to the question of what they would do if their budget was doubled by saying that they would:

- make existing services more flexible/accessible

- address the accreditation problem
- increase their human resources
- assess each service/program to ensure a holistic approach was taken and would force collaboration among service providers
- centralize some services and eliminate others

Part II: Information submitted by Planned Parenthood

1. Number of clients who are core area residents:

- Spanish - 65%; Vietnamese - 78%; Cambodian - almost 100%; Chinese - 85%
- newcomers come to live in the core area because the settlement agency finds housing here; friends recommend

2. Clients like the following about living in the core:

- rent is cheaper
- convenience; close to school, work, shops, day care, friends (can get help from friends easily)

3. Clients dislike the following about living in the core:

- not a safe area, break-ins, noisy

4. Clients intentions of moving:

- Spanish - after living in the core for a while, approximately 75% would like to move
- Vietnamese - plan to move if they have better financial status
- Chinese/Cambodian - most will remain in the core area

5. Clients used a variety of services:

Inside the core area:

- Immigrant Women Employment Centre
- Manitoba Housing
- International Centre
- Immigrant Access
- Interfaith
- Planned Parenthood Manitoba
- Women's Health Clinic
- Women's Hospital, Misericordia
- Mount Carmel
- Day Care
- Social Security (Welfare)

Outside the core area:

- St. Boniface Walk-in Clinic/St. Boniface Hospital

6. Issues

a) Housing

- don't know how to fill forms
- don't understand the lease/damage deposit
- landlord not paying attention to tenants' needs such as no heat, no water, insects, etc.
- receive complaints from other tenants regarding noise

b) Employment

- cannot get job in the same skill as in one's own country
- don't know where one can get job training information
- needs interpreter
- counsellor isn't helpful, pushing one to work in an inappropriate job, not relating to one's job

c) Health

- language problems
- don't know how to get another doctor if not satisfied
- attitudes of doctor (not paying much attention to patients)
- don't know where to get information i.e. pharmacare, dental system

d) Education/Training

- don't know where to get this information
- English ability not good enough for further training
- parents who have children in junior and senior high school find difficulties in communicating with teacher

e) Recreational

- no transportation (no car)
- needs friends to go with (afraid of getting lost)

7. Priorization of needs:

- for the Spanish Community:
 - Employment
 - Health
 - Housing
 - Education/Recreation

- for the Chinese/Cambodian Community:
 - Employment
 - Housing
 - Health
 - Recreation
 - Education

- for the Vietnamese Community:
 - Employment
 - Health
 - Education
 - Housing
 - Recreation

Parents would see employment as the most important to them while adolescents may regard education and recreation as more important.

8. In terms of how needs and priorities differ between the core and non-core areas, there may not be much difference. People living in non-core areas, however, may have a better financial status.

9. Gaps in services:
 - no culturally appropriate information and resources in one's own language about services available
 - language barrier

10. How these gaps might be filled:
 - provide information and resources in one's own language
 - use trained interpreters
 - supply detailed orientation to newcomers on Canadian Health, Employment, law, housing, education, etc.

**FOCUS GROUP SESSION
WITH
GENERAL SERVICE PROVIDERS**

COMMUNITY BASED NEEDS ASSESSMENT OF THE INNER CITY

FOCUS GROUP SESSION

WITH

GENERAL SERVICE PROVIDERS

The following community organizations were invited to participate in this session.

- 1) Augustine United Church
- 2) Big Brothers Association of Winnipeg, Inc.
- 3) Bookmates
- 4) Central Child and Family Services of Winnipeg
- 5) Community Education Development Association
- 6) John Howard Society
- 7) Klinik, Inc.
- 8) Manitoba Anti-Poverty Organization, Inc.
- 9) Mount Carmel Clinic
- 10) Salvation Army Family Services Centre
- 11) St. Matthews/Maryland Community Ministry
- 12) University of Winnipeg Athletic Centre
- 13) Winnipeg Harvest
- 14) Agape Table
- 15) Big Sisters Association of Winnipeg, Inc.
- 16) Elizabeth Fry Society
- 17) North End Community Ministry
- 18) NorWest Co-op

There were fifteen participants in this session representing the first thirteen agencies listed above.

1. The majority of the agencies' clients are core area residents. Eleven agencies indicated that 75 to 100% of their clients were core area residents, while two agencies indicated that between 50 and 75% of their clients were core area residents.

Most clients come to live in the core area due to financial pressures; a large number are either City of Winnipeg Welfare recipients or Provincial Welfare clients

Other clients are recipients of Unemployment Insurance, compensation, old-age pensions or are transients. In many instances, financial positions dictate that people must live in the core area.

2. Participants indicated that their clients disliked the following about the core area:
 - poverty and everything there is to dislike when you live a life of poverty
 - lack of play areas
 - lack of green space and parks
 - lack of opportunities to obtain equipment, etc., to access recreation services

- deplorable housing; slum landlords
- violence; gangs
- that many services operate between 9:00 a.m. - 5:00 p.m. and do not fit into a single mother's working schedule
- the crime, which is obvious and often includes being broken into, or being robbed of belongings in other ways
- the scale of economics; food costs far too high

3. Participants indicated that their clients liked the following about the core area:

- the central location
- the churches who serve people in their own community
- friends/resources located in this area
- familiarity
- transportation
- several schools
- community clubs
- health care services

4. Clients utilized services represented at the focus group, as well as the following: Welfare, Community Clubs, Parents Without Partners, Legal Aid, Child Guidance Clinic, Adult Education Centre.

5. It was indicated that clients experienced the following problems when accessing:

a) Housing

- homes are deplorable; should be condemned
- landlords do not keep rented residences in proper repair
- landlords rent to whomever is forced to live there. Rentalsman's office must have an overwhelming workload and it would be impossible for it to work through the complaints
- the amount of money supplied by the Province and the City Welfare is much below what is favourable to allow clients to live in places which are not "dumps"
- when clients apply for Welfare they are asked to get furnished places; this is an unrealistic request as furnished places are at an impossibly low premium and, when available, are in the same condition as the unfurnished residences i.e. unlivable

b) Employment

- lack of job opportunities for support of self and family
- a society with a minimum wage scale, that is comparable with Welfare rates, does not provide incentive for a person to work
- generally speaking, the people who are under-privileged, and living in the core area, are limited very much in work and life skills, which makes them "unemployables"
- lack of opportunities to upgrade one's skills and level of education
- the need for child care for those working shift work or part-time is not being met

c) Health

- health is hardly ever an emphasis in the home of the poor; poor health can breed personal problems such as low self-esteem and feelings of worthlessness which leads to a lack of initiative to do something with ones life
- the Welcome Home project made an effort to bring psychiatrically disabled patients back into the community--but lacked a continuum of support services in place to deal with this groups' needs. Neither the community nor the agencies were adequately prepared to deal with their needs.
- In terms of the psychiatrically disabled, there is limited access to services; many are unable to deal with living in the core; many service providers do not understand the effects of medication on the individual's ability to function.

d) Education

- accessing education is a problem with the under-privileged because of the circumstances and surroundings in which they find themselves

e) Recreation

- need for recreational open spaces where youth may play safely during the day and evening hours

6. Comparisons of needs of core area and non-core area residents:

- in terms of similarities: child care needs; recreation; the struggle of single parents to secure an appropriate economic base to raise their children
- in terms of differences: more persons living outside the core tend to be employed and are able to live more comfortable, stable lives; persons living outside the core seem to be more aware of what services are available in order to have their needs met

7. It was indicated that most needs are not being addressed, and if they are not by the appropriate services.

- many needs are met, to some extent, through peer supports/family supports, but not to the degree of professionalism capable by professional centres
- because of all the community services, both voluntary and professional, available to core area residents the needs are being met in greater measure than could be the case
- Winnipeg can be proud of the way that the community services try desperately to meet the needs of its core area residents

8. Gaps were indicated as follows:

- more housing to the economic scale of clients
- more day care facilities at extended hours of operation
- lower transportation costs

- dental plans (insurance) for lower-income families
- City Welfare and Provincial Welfare by law are prohibited from helping people under the age of eighteen
- people on Provincial Welfare often have to pay charges for something that will be reimbursed to them, i.e., damage deposits, moving costs; these people are not in a position to pay extra expenditures
- there is a need for shelter for single, transient women
- there is a need for better housing
- there is a gap with homeless children under eighteen, particularly between the ages of seventeen and under eighteen. Child and Family services are not meeting their responsibility in this area
- there are gaps in assistance provided by for Provincial Welfare, for example a single mothers have to wait for their individual files to be transferred from the town or city they have left to the Winnipeg office, before help is made available; (surely this could be settled via a phone call)

9. Suggestions for filling gaps:

- ensure child and family services and Provincial Welfare is fulfilling their responsibilities
- provide extended monies to long-term solutions; reward those programs that have successfully kept in/under budget.
- undertake less research on needs and fewer studies on solutions and more activities, opportunities and actual programs.
- require child care centres in companies where there are a certain number of single-parent families; provide tax credits to those centres and the consumers of service
- spend less money on government structure and administration of monies and programs
- continue to fund the Employee Assistance Program, through the John Howard Society

10. Thirteen of the fourteen agencies voiced the following concerns:

- Representatives feel frustrated by funders when asked again to sit and talk about issues: Core Area problems are evident! This project was a very political solution to a problem.
- It was suggested that all the relevant information is available through past reports/studies. Where is the information they have received in the past? These reports/studies include:
 - The Ryant Report: provides the housing problems and solutions to them. Social Assistance Coalition of Manitoba has housing information.
 - A recreation study has been completed.
 - Briefs have been presented twice to Core Area by most groups in September 1985 public hearings before Core 2.
 - The Hunger Survey by the Food Network, 1989.

- May 9, 1989 forum at the Freight House sponsored by Inter-Agency Urban Futures Circle.
 - United Way Basic Needs Assessment.
- It was felt that funders/governments have no political will to go after i.e., slum landlords; they have to admit their efforts are limited; barely scratch the surface; governments/funders don't have the political will to put money into one area and deal with that.
 - To whom is the Core Area accountable? It appears to the service providers that a one-sided relationship has developed where agencies are required to supply action plans, etc. Funders never supply information regarding their plans of action; how will they deal with situations as funders? The service providers suggest that funders are just as accountable. On what area is the Core going to focus following the gathering of information? Will they formulate a plan of action?
 - The service providers felt that the Advisory Council should be more representative of the Core: those who were more representative in that they were Inner City residents, or users of services or knowledgeable of the area.
 - Where is the Inner City Foundation? No criteria have been set out. Who responds to the program? Who takes ownership?
 - Funders have responsibility to assist agencies in accessing Core long-term funds: if proven projects such as Healthy Parent/Healthy Child cannot survive, how can others?
 - The Core Area concept was supported in principle--and service providers did not want to see it thrown out.
 - Service providers voiced the wish that a mechanism be created whereby the funders and service providers could gather together to move forward. Funders and service providers need to focus on common interest with people. The desire to move forward and be cost-effective in planning together, was supported.

11. Suggestions regarding the planning of other focus groups:

- Utilize the Delphi technique of questioning or personal visits.

**DISCUSSION QUESTIONS
USED IN
FOCUS GROUP SESSIONS**

DISCUSSION

1. How many of you [your clients] are Core Area residents? How did you [they] come to live here?
2. What do you [your clients] like/dislike about living in the core? Do you [they] plan to move?
3. Describe the community services you [your clients] have used in the Core Area in the past? Any community services that you [your clients] have used outside of the Core Area?
4. What particular problems have you encountered in accessing services pertaining to:
 - housing
 - employment
 - health
 - education/training
 - recreational
5. How do you think your needs might be different from others who are not here today?
6. How would you prioritize these needs?
7. How do needs and priorities differ among the various age groups?
8. How do needs and priorities differ between the core and non core areas?
9. Are (how well are) these needs currently being met?
10. What "gaps" in services are there? How would you prioritize these gaps?
11. How might these gaps be filled?
12. What criteria should the Advisory Council be using when making funding decisions about programs/facilities pertaining to some of the needs that have been outlined here today? How would you go about deciding which proposals to fund? [If your budget was doubled, how would you spend it?]
13. Do you have any suggestions regarding the planning of the other focus groups?