

While people are getting settled,
please consider your answer to
the following questions:

1. What strategies have you used to build trust with the LGSM community?

2. What strategies has your organization put in place to offer a more inclusive or welcoming service to the LGSM community?



Improving Accessibility of Health and Social Services for Low German Speaking Mennonites in Elgin, Oxford and Norfolk Counties

October 2022

Prepared for presentation at *Diverse Paths*, an exploration of Low German-speaking Mennonite experiences

October 14, 2022, University of Waterloo

Agenda

- How our local Situational Assessment came to be
- The methodology and approach utilized
- Findings from the Situational Assessment
- Impact of the pandemic
- Path forward post pandemic

Project Team

- **Linda Funk**, Registered Dental Hygienist - SWPH
- **Rob Haile**, Public Health Planner - SWPH
- **Carolyn Richards**, Program Manager - SWPH
- **Erica Arnett**, Program Manager - SWPH

Steering Committee

- **John Fitzgibbon** - St. Thomas-Elgin Children's Services
- **Abe Harms** - Mennonite Community Services
- **Carole Keeping** - County of Oxford
- **Mandy Koroniak** - St. Thomas-Elgin Social Services
- **Cara VanKlaveren** - County of Oxford
- **Abe Wall** - Thames Valley District School Board
- **Jeff Wilson** - Haldimand-Norfolk Social Services

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Anna Bergen, MCS

Lily Hiebert-Rempel, MCC

Frank O'Connor, Norfolk Community Help Centre

Old Colony Faith Leaders

Abe Wall, De Brigj Radio

Abe Wall, TVDSB

Netti Wall, FESPA

Petrusia Hontar, Local Immigration Partnership

Jaime Fletcher, SWPH

Sarah Moffatt, SWPH

Jennifer Snell, HNSS



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THE BRAVE PARTICIPANTS



Rationale

South West LHIN recently identified lack of data re:
LGS Mennonites

Fall 2017 Southwestern Public Health (SWPH)
identified LGS Mennonites as a priority population

SWPH discovered and collaborated with
community partners from Elgin, Oxford, and
Norfolk Counties who expressed interest in LGS
Mennonite population

Consultations

- Gaining support for the project
- Support from the community
- Blessing from faith leaders



Research Questions



What gaps in programs and services exist for LGS Mennonite children and families?



What barriers and facilitators to program and service delivery exist for providers?



What barriers and facilitators to accessing programs and services exist for LGS Mennonite children and families?

Study Design

- Service Inventory
 - ▶ Understand service environment in three study regions
 - ▶ 211 Ontario and Southwesthealthline.ca
- Phenomenology
 - ▶ Understand the essence of 2 phenomena: accessing and delivering health and social services as it relates to LGS Mennonite children and families



FINDINGS

Service Provider Study Participants

- Sought 12 Health and Social Service Providers
- Eligibility criteria:
 - ▶ Identified in environmental scan as providing health/social services to LGS Mennonites
 - ▶ Defined parameters (as per ethics proposal)



Lived Experience: Service Providers

- **Essence of experience**

- ▶ Developing and Applying a Practical Understanding of the Community

- **Essential themes**

1. Disconnect between the systems in which providers work and the cultural practices and values of clients
 - E.g. surveys, service hours, financial and tech barriers
2. Adapting and providing flexibility in programming
 - E.g. Program offerings, service hours, transportation alternatives

this is halfway



meet me there.

“

It was me learning to simplify and to get on the same vibration as them...getting into a position where I can make a positive impact or help this family help themselves. Because if I'm not on the same level of approach as them, then what's the point of me even being here, right? Like, I can't be effective in my role if I'm not a chameleon. [SP 010]



”



What strategies have you used to build a trusting relationships with the LGSM community?

Lived Experience: LGS Mennonites

- **Essence of experience**
 - ▶ Fitting into 2 different worlds: LGS Mennonite culture and Canadian health and social services culture
 - Judgement and Discrimination
 - Language Barriers



“

There were some, they made fun of me for being Dietsche [LGS Mennonite]. How many children we would have and nurses sometimes...made fun of us, saying that in a year we would be back again.

[LG 012]

”

Lived Experience: LGS Mennonites

- **Essence of experience**

- ▶ Fitting into two different worlds: LGS Mennonite culture and Canadian health and social services culture

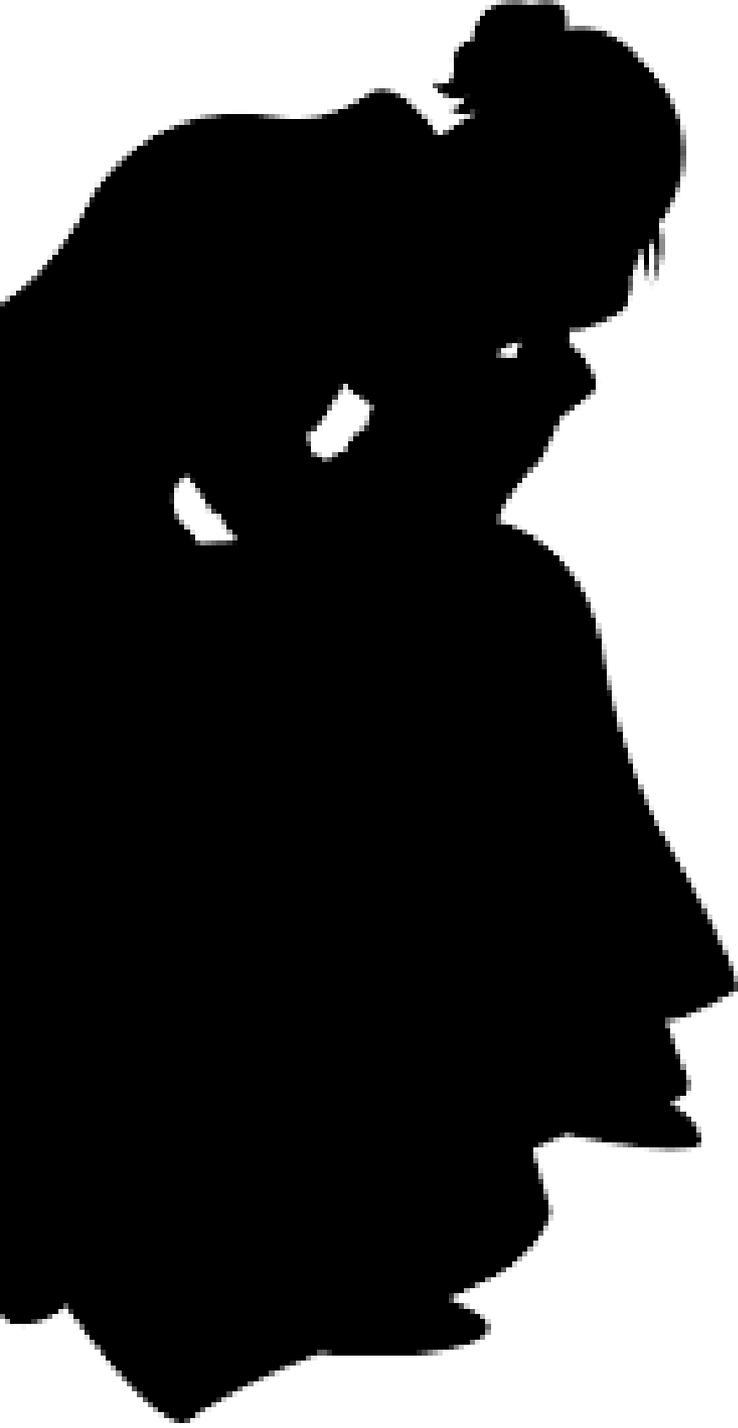
- **Essential themes**

1. Enabled to step out of my comfort zone and make connections
2. Balancing family needs with individual needs

1. Enabled to step out of my comfort zone and make connections

- Isolation
 - ▶ Comfort at home with families and work
 - ▶ “Nerves”





“The biggest disease today is not leprosy or tuberculosis, but rather the feeling of being unwanted.”

Mother Teresa

1. Enabled to step out of my comfort zone and make connections (continued)

- Welcoming Environments
 - ▶ Encompasses an entire experience
 - ▶ Recognized as valued clients regardless of cultural background
 - ▶ Feelings of comfort, like being back at home



2. Balancing family needs with individual needs

- Family responsibilities vs service use
- Access barriers (inconvenient hours, wait times)
- Financial barriers (e.g. No OHIP)



“

When I go there and it's only the lady who speaks English in there, I can't speak much English, but she can help me so much. I never leave there without getting everything that I need. I can explain to her what I want, and it doesn't matter if there isn't Low German...she can help so much...

I like it...when they really explain it to me, what exactly it is, and if I can't understand, then trying in a bit of a different way to explain it. When doing that, I can figure out what they mean. [LG 013]

”



Recommendations

Working Group Recommendations

1. Share and disseminate findings of the situational assessment with participants and providers and agencies that provide services to LGS Mennonite children and families.
2. Form a Community of Practice, which aims to foster growth and understanding of the LGS Mennonite community, with providers and agencies that offer services to LGS Mennonite children and families. Work with the Community of Practice to explore creative ways to improve service for LGS Mennonite children and families.
3. Identify ways to deliver services to LGS Mennonite children and families in culturally-appropriate ways.



Pandemic

“Aylmer used to be a quaint little town. Now it’s a hotspot for hate, intolerance and stupidity. And I can’t see a way back from that.” The unrest has taken a toll

In a small Ontario town caught in COVID’s rural-urban divide, ‘people don’t even talk to each other’

**‘Cauldron of hostility’ bubbles
judge mulls locking pandemic-denial
doors**

2,000 people march through Aylmer, Ont., to protest COVID-19 health measures



NOW WHAT?

Community of Practice (CoP)

- Established pre-pandemic
- Our Local Immigration Partnership continued virtual meetings through the pandemic with a focus on programming changes
- Sept 2022 re-ignited the CoP with a priority setting meeting
- The identified themes from that planning session will result in additional work groups and resources developed to address the identified themes

Community of Practice (CoP)

Theme	Votes
Importance of understanding community culture, values, input and needs	Total: 24
Resources and training for staff working with the LGM community	Total: 19
Organization understanding, values, trust, and barriers	Total: 13
Central communication	Total: 12
Partner with LG faith leaders, groups, and businesses in a meaningful way	Total: 7
Integration of services and addressing gaps in services	Total: 7

Group Question

- What strategies has your organization put in place to offer a more inclusive or welcoming service to the LGSM community?



AT SWPH

MEET ME WHERE I'M AT: MESSAGING THAT WORKS





THANK YOU :)