

## Case Study #3

# Getting the Word Out: Kitchen Meetings as a community communications tool



## A. Introduction

Communicating information about the availability of health and social services to the general public is always a challenge. Mass media, such as newspapers, television and radio, are useful, but imprecise, targeting a large audience, but not always getting to those who need the information without a large expenditure for saturation coverage. Alternative methods can be used, like pamphlets distributed to community information points (like libraries, government offices & clinics) and community bulletins. But they too sometimes miss the very people who need them.

Getting the word out – distributing vital information about services – is even more of a problem in a minority language community, whose access to mass media, pamphlets and community bulletins is restricted by language. The whole issue is further complicated when that community is aging and/or less socially connected, due to isolation and the language barrier. Fear of approaching an institution when you cannot speak the majority language plays a large role in people’s reluctance to access the institution or service.

*Kitchen table* meetings, which target getting the message out “by word of mouth” can be an effective tool in disseminating key information about service availability and reinforce the connection between the service providers and the minority language community.

## B. Starting with an issue

In the early 1990’s funding for health care across Canada was at a low point. In Quebec, this led to the first “reform” of health services into more and more regional models. For example with the bringing together of services into larger institutions and the closure of specialist centres – like the English language institutions which had served the English Speaking Community (ESC) for generations. In the Eastern Townships, this meant the proposed closure of the English language hospital – Sherbrooke Hospital, and its long-term care facility.

### C. Identifying the situation

In early 1993 this issue was of great concern among the ESC in the Townships. “Their” hospital and a vital access point for health care services was threatened. People were upset and concerned, already it was difficult to obtain services in English. What would happen once the hospital closed as a general health care facility? Where would they go?

On the other hand, local CLSC’s were seemingly unaware of a substantial demand for particular services in English. The recorded use of such services seemed to indicate small demand yet the need was there. Here was a classic problem in communications – the target clientele were concerned, upset and unaware of services the health care provider had available, and the provider was not communicating effectively the availability of the services. They were not being used and so the provider was reconsidering whether or not to continue providing them at all. The usual informal signals from the community which would alert the provider – talk at home or socially about such concerns, was lacking due to the lack of interaction between the majority francophone provider and the ESC. This issues was especially seen in those over the age of 45\* whose capacity in the second language kept them more isolated socially from the majority francophone culture.

It was in this context, working on a hunch – the intuition of the well-tuned members of their community – that the Townshippers’ Association made application for and *received funding through the Quebec/Canada entente, backed by the Régie régionale de la santé et des services sociaux Estrie and approved by the Ministry of Health and Social Service, as well as from several local MNAs and Townshippers’ Research and Cultural Foundation to organize a series of “kitchen meetings” around the region.*\*\*

The project became known as ***User Empowerment through Knowledge***, jointly staffed by a contract animator/resource person and the staff of Townshippers in the Estrie region.

### D. Building a Knowledge Base

Never underestimate the value of knowing your community!

Maggi Faulks

The first task of the project was to gather information – to build the knowledge base. They gathered information on the health and social services network and the services offered in the Estrie region. And they gathered information on their own community.

This involved:

- creating a list of local institutions and CLSC’s in each part of the region
- developing a brochure of locally available health care services

- identification of a contact person in each institution/CLSC and a representative who would present information and answer questions, in English, at each meeting
- identifying key communities in which to hold meetings
- locating community hosts and locations for the meetings
- identifying a list of key communicators in the ESC each area to be invited to the meeting in their community – people who could “spread the word”

## E. Getting the Community Involved

Kitchen meetings are built on the following principles:

- approachable informal, somewhat intimate and comfortable setting, preferably people’s homes, but also community halls or churches
- approachable size to allow for maximum interaction
- refreshments – food always makes any community event more effective!
- format which allows participants to ask questions, allows participants to tell their stories and express their concerns

Each meeting was planned for about 2 hours duration and was facilitated by an animator, assisted by a volunteer board member from Townshippers, The optimal size of each meeting was set at about 20 people.

The agenda for each meeting was roughly the same:

- an introduction and welcome from the volunteer board member
- a general introduction to the health and social services network from the animator
- presentations from the local CLSC
- questions & answers/feedback/sharing of stories
- some information about Townshippers’ activities
- a thank you to participants, presentors and especially the host
- refreshments

## F. Building Effective Partnerships

Effective partnerships are created when diverse entities each find creative ways to work with each other to meet each partner’s needs.

*Kitchen meetings* in the Estrie helped Townshippers’, the Régie regional and the local CLSC’s to work together as partners:

- to effectively connect with the ESC in their region
- listen to its needs and concerns through the stories of individuals
- disseminate basic information
- respond to individual concerns

Most importantly, the project gave Townshippers' and the local health care and social services system an opportunity to meet each other, build a network and work together – a win/win opportunity.

## G. Key Lessons Learned

### Keys to making kitchen meetings work

#### Location

- The choice of the host was key – they had to be approachable/connected to their community
- Homes were more intimate settings, but churches and community halls were more neutral territory
- Avoid using institutional meeting rooms as a setting (ie. a CLSC board room) as it affects the atmosphere and intimidates participants

#### Participants

- Knowledge of the key communicators is essential, find the people who know them through your community organizations
- Personal invitations – one very knowledgeable/known community person did most of this
- Size of the group – 20 was just right (larger group was intimidating for some participants and promoted one-way interaction – a smaller group reduced the multiplier effect)
- Follow up after a month or six weeks to keep up the connections – both with the participants and the partners

#### Timing

- Be careful about weather issues – winter conditions can foil your plans and make it impossible to reach even your most committed participants

#### Content

- Don't let the presentations get too institutional and dense, provide simple organization charts and avoid too much referral to I.N.I.T.I.A.L. bodies – participants get lost and/or confused

- Keep the information presentations simple and lively and follow the principles of good adult pedagogy
- and make this clear to your presenters well in advance

## Materials

- Make certain your documents/handouts have the most correct and up to date information
- and your partners provide good information in the participant's preferred language

## Potholes on the Road (to be avoided!)

- An innovative idea like this can get lost as the pressure is to slip back into old patterns. Don't dilute the concept.
- Don't succumb to the temptation to "add on" more stuff.
- Don't overload the agenda with too much to do.

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*\* This is a question of the history of language education in the province. Those born before 1956/57 of English speaking mother tongue did not receive the same kind of French language education as did their younger brothers and sisters, resulting in less facility in the second language.*

*\*\* ref:300pc/ltclsce2.wp a letter from Paulette Losier, President of Townshippers' dated November 17, 1993*