Thinking Outside of the Breadbox

A “how-to” handbook for food security programming in Community Health Centres
Acknowledgements

The GTA CHC Food Security Network research committee
Bronwyn Underhill, Julia Graham, Linor David and Gurpreet Karir

GTA CHC Food Security Network for ongoing consultation and review of the handbook

Interviewees for telling their programs’ ‘stories’
Jen Quinlan, Bronwyn Underhill, Jackie Carruthers, Lyndsay Tchegus, Lori Metcalfe, Julia Graham, Karima Kassam, Linor David, Sandra Van

All of the survey respondents and contributors to the handbook

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Introduction

Food innovation is abundant in Toronto. Interest in food and how it is grown, processed and distributed is increasing as people recognize the connections between our health, our economy, our environment and our communities. Working mostly from the grassroots, individuals, agencies and communities are being pulled by their interest in food to work together to create a path towards a more equitable, sustainable and resilient food system.

Community Health Centres (CHCs) are one of the innovators forging ahead on this new path. Some CHC’s have a rich history of creative engagement with food issues: others are exploring where food initiatives might fit with current programming.

But why food, and how does it matter to health? There is an abundance of evidence that in many low-income communities, there is simply not enough money to purchase nutritious food. This lack of access to food is often defined as ‘food insecurity’, “a condition in which people lack the food needed to provide them with the energy and nutrients to live an active and healthy life.” This definition can be further elaborated to stipulate the provision of food through a sustainable food system that reflects principles of self-reliance and social justice.

Poverty is a central determinant of food insecurity. Food insecurity tends to be most prevalent in vulnerable communities, compounding existing inequities to have additive impacts on overall well-being. The implications of food insecurity among vulnerable groups are well documented: outcomes include decreased nutritional status, lower overall health, and poorer academic performance in children. Good food has been proposed as one way to address the health, social and economic costs of poverty.

Food is not simply an end in itself. More than just addressing individual hunger, tackling food insecurity offers an opportunity to touch on broader issues of poverty, environmental stewardship and social cohesion. Increasing access to healthy food requires thinking outside of traditional ‘silos’ to link food production and distribution with health promotion. In a 2010 report by The Stop Community Food Centre, their programming outcomes were found to be related to income and employment, social support and connectedness, and health behaviours, education and literacy.

Individual and community food programming is a strong fit with the mandate of CHCs, who clearly articulate that addressing the ‘social determinants of health’ is at the heart of effective primary health care. In the summer of 2010, the GTA Community Health Centre Food Security Network embarked on a project to understand the scope and range of food security programming offered through CHCs. The results are indicative of the creativity and diversity of the CHCs themselves. The programs also show that they are related to so much more than food. Food builds connectedness and cohesion, foundations for a strong community that quite literally bring people to the table.

The initiatives listed in the handbook were gathered from a survey sent to all 29 CHCs in the Greater Toronto Area. Further interviews with CHCs that did respond were conducted to capture the ‘stories’ that these programs tell.
How to use this handbook:
The handbook is divided into three main sections:
1. “How to” description for a cross-section of the many types of food security programs offered at CHCs
2. Additional resources for further reading or reflection
3. Appendices with concrete examples of supportive documents for food security programs

The manual is meant to be used by people interested in starting up or expanding a food security program in a Community Health Centre. Of course, many of these programs can be run outside of CHCs; however, this manual was created by interviewing staff at CHCs and therefore some of the details and focus of the programs will be influenced by their roles.

Each program description page includes:
- A brief introduction to the program
- Some of the potential outcomes to be expected from the program
- Steps involved in starting the program
- Program resources used
- Steps involved in running the program
- Other key points
- Additional resources
- Appendices

The handbook is not meant to be prescriptive nor to attempt to show the “right” way to run a certain program. Rather, it is meant to show some guidelines, highlight good practices, and provide some inspirational ideas. We plan to host this manual on a website in the future and we hope that it will become a living document that grows and changes based on feedback and experience from additional CHCs and other agencies. Please feel free to provide feedback to Julia Graham (julia.graham@stonegatechc.org) or Bronwyn Underhill (bunderhill@fhc-chc.com). Enjoy!

Sources:
1. Four ‘food solutions’ reports from the Metcalf Foundation offer a comprehensive introduction to the food issues facing Ontario.
3. Ibid 2010
6. Ibid 2010
7. Ibid 2010
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<td>Jennifer Atkins &amp; Yousra Dabbouk</td>
<td>Dietitian</td>
<td><a href="mailto:jatkins@accessalliance.ca">jatkins@accessalliance.ca</a> &amp; <a href="mailto:ydabbouk@accessalliance.ca">ydabbouk@accessalliance.ca</a> 416-324-0927 ext 288</td>
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<td>Anne Johnston Health Station</td>
<td>Sasha Whiting</td>
<td>Health Promoter</td>
<td><a href="mailto:sashaw@ajhs.ca">sashaw@ajhs.ca</a> 416-486-8666 ext. 299</td>
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<td>Black Creek CHC</td>
<td>Jennifer Schneider</td>
<td>Dietitian</td>
<td><a href="mailto:Jennifer.schneider@bcchc.com">Jennifer.schneider@bcchc.com</a> 416-249-8000 ext. 2236</td>
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<td>Carefirst Family Health Team</td>
<td>Rowena Leung</td>
<td>Registered Dietitian</td>
<td><a href="mailto:Rowena.leung@carefirstfht.com">Rowena.leung@carefirstfht.com</a> 905-695-1139</td>
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<td>Linor David</td>
<td>Early Years Health Promoter</td>
<td><a href="mailto:ldavid@ctchc.ca">ldavid@ctchc.ca</a> 416-703-8482 ext. 233</td>
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<td>Karina Loayza</td>
<td>Registered Dietitian</td>
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<td>Jedid-Jah Blom</td>
<td>Community Dietitian</td>
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<td>Early Years Social Worker &amp; Community Health Worker</td>
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<td>Catherine Pestl</td>
<td>Community Health Worker</td>
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<td>Bronwyn Underhill</td>
<td>Health Promoter</td>
<td><a href="mailto:bunderhill@fhc-chc.com">bunderhill@fhc-chc.com</a> 416-640-5298 x202</td>
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<td><a href="mailto:Krystyna@4villages.on.ca">Krystyna@4villages.on.ca</a> 416-604-3361</td>
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<td>South Riverdale CHC</td>
<td>Gurpreet Karir</td>
<td>Health Promoter</td>
<td><a href="mailto:gkarir@srchc.com">gkarir@srchc.com</a> 416-461-1925</td>
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<td>Stonegate CHC</td>
<td>Julia Graham</td>
<td>Community Health Worker</td>
<td><a href="mailto:julia.graham@stonegatechc.org">julia.graham@stonegatechc.org</a> 416-231-7070 x229</td>
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<tr>
<td>Vaughan CHC</td>
<td>Sara Berdugo</td>
<td>Community Dietitian</td>
<td><a href="mailto:sberdugo@vchc.com">sberdugo@vchc.com</a> 905-303-8490 ext. 145</td>
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<td>Women’s Health in Women’s Hands</td>
<td>Yogeeta Sharma &amp; Cindy Tsai</td>
<td>Community Dietitian</td>
<td><a href="mailto:Yogeeta@whiwh.com">Yogeeta@whiwh.com</a> &amp; <a href="mailto:cindy@whiwh.com">cindy@whiwh.com</a></td>
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<td>Unison Health and Community Services</td>
<td>Karima Kassam &amp; Marissa Strano</td>
<td>Community Health Promoter &amp; Community Dietitian</td>
<td><a href="mailto:Karima.kassam@unisonhcs.org">Karima.kassam@unisonhcs.org</a> &amp; <a href="mailto:Marissa.strano@unisonhcs.org">Marissa.strano@unisonhcs.org</a></td>
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“How To” Programming Guides
**Introduction**

Food access committees are a forum within CHCs and communities to promote food security. Internal committees work with CHC clients, management and staff, while an external committee collaborates with local residents and community stakeholders. Food access committees complement existing work in the community by providing a forum for the exchange of ideas in order to develop a comprehensive community-based response.

**Potential Outcomes**

- Committee/network participation

**Steps involved in starting program**

*Internal Committee:* Gage staff interest in starting a committee through all-staff or team meetings, email, flyers or posters. Committee members can also include volunteers such as students, clients or peer leaders.

*External Committee:* Connect with individuals/groups who are interested in addressing food security. Potential committee members may include agencies running community food programs, local schools, representatives from councillor’s offices, residents, or faith groups.

**Program Resources**

**Staff time:** Minimal time required to coordinate and attend meetings.

**Steps involved in running program**

*Internal:*  
1. Develop vision, goals and objectives for the committee. Meeting frequency will depend on intensity of programming and staff availability.
2. Identify issues and concerns impacting clients and initiate responsive programming.

*External:*  
1. Identify issues and concerns impacting residents.
2. Develop and assist with the implementation of grassroots responses, including advocacy, social action, fundraising, and or project specific support.
**South Riverdale CHC**

**The Riverdale Food Working Group (RFWG)** was founded in 2008, and is a partnership between community members and 4 organizations including South Riverdale Community Health Centre, Eastview Neighbourhood Community Centre, Ralph Thornton Centre and Mustard Seed, striving to make Riverdale a food friendly and food secure neighbourhood. The group’s mission is to facilitate the building of healthy and equitable food systems, address food insecurity issues, and to engage community residents to participate in activities that will improve access to healthy and fresh food, while raising awareness about food issues and offering opportunities for skills development, education, and empowerment.

Some of the group’s activities include workshops (seasonal food preserving, cooking, healthy eating, cooking on a limited budget, small space gardening, composting), rural and urban produce picking trips, and a fresh food voucher program.

The RFWG will be piloting a good food market, in partnership with FoodShare at the South Riverdale Community Health Centre site. The market will be every Tuesday from 3:00pm-7:00pm starting June 5th.

The RFWG is a community-led initiative supported by organizational partners to determine what food based programs and activities work best for the Riverdale community focusing on low-income and marginalized populations. Funding has been limited, and has come from the Carrot Cache, the Healthy Communities Fund, private donors, and creative fundraising schemes such as the sale of preserves.

**SRCHC Food Security Committee** is a cross-organizational committee with a vision to promote access to healthy food for all people in the SRCHC catchment, while supporting a strong, local and ecologically sound food system.

The committee has held a number of seasonal community meals, picks from Not Far From the Tree, outings and preserves aimed for the larger SRCHC population and membership. The Committee has also ran a number of activities to engage and inform staff such as lunch & learns and meetings that look at issues of food security. The committee successfully hosted a film night – featuring the movie FRESH, followed by a community discussion.

For the current year the committee will be working on an internal food procurement policy.

- **Staff involved:** Eight staff including one management member
- **Program supports:** Small budget to support initiatives

**Access Alliance Multicultural and Community Services**

**Community Works! Health and Income Security, Together** has been recently established to advocate on issues that pertain to social assistance recipients (quality of service, integrity/adequacy of the system) and larger systemic issues (racialized poverty, community-based action research).
Appendix

1.1 Fairview Food Security Network Terms of Reference
1.2 GTA CHC Food Security Terms of Reference
1.3 External Food Access Committee Guidelines
1.4 Internal Food Access Committee Guidelines
1.5 South Riverdale CHC Internal Food Security Committee Terms of Reference
Centralized Cook

The centralized cook is a fulltime staff member who plans for and prepares all meals and snacks for programs run on and off-site at the CHC as well as meetings and events.

Introduction

An ‘in house’ cook is a way to integrate ‘food access’ into all programs offered at the CHC. The cook streamlines the provision of meals and snacks by centralizing the food planning, purchase and preparation process.

Potential Outcomes

- Improved nutrition (increasing access to nutritious and fresh foods)
- Chronic disease education and intervention
- Nutrition education
- Skills development

Steps involved in starting program

At East End CHC, staff identified that a centralized cook would be more cost effective than each staff preparing food for their program, and would also allow the dietitian to work directly with one staff member rather than consulting with all CHC staff.

Program Resources

**Staff time:** Full time cook, consultation from Dietitian
**Cash:** Funding for ingredients
**Program supports:** Menu plans; kitchen space and supplies

Steps involved in running program

1. The cook and the dietitian prepare meal plans that are appropriate to the dietary needs of certain populations (e.g. foods that prevent osteoporosis for a group on bone health). These plans balance nutritional goals with the knowledge of the group participants (e.g. the grocery store that clients use most often is also used by the centralized cook)
2. The cook prepares the meal/snack for existing programs.
3. After the group has eaten, the cook may come in to give a quick tutorial on how to make the meal.

Measurement/Evaluation

- Improving nutrition is a measured outcome for most programs at the CHC.
- Informal feedback from participants.
Farming and Gleaning Trips

Farming and gleaning connect people more closely to their food, and provide an opportunity to learn more about the food system. Providing bus transportation reduces the most costly part involved in leaving the city to visit local farms.

Primary Focus of Program

- Environmental stewardship/food system sustainability
- Improved nutrition (increasing access to nutritious and fresh foods)
- Outreach strategy

Steps involved in starting the program

Connect to local farms and cheaper bus rates through North York Harvest Food bank

Program Resources

Staff time: Approximately one day per trip
Money: Funding for buses (approximately $200 per bus).
Program supports: Handouts related to the food that will be picked

Steps involved in running the program

1. Trips can be offered at any time during harvest season (June to October). Consider what crop would appeal to CHC clients when choosing the farm and the date for the trip.
2. Some farms offer the food at no cost; others operate on a ‘pay for what you pick’ basis.
3. Advertise the trip using agency networks, word of mouth, CHC program brochures, etc. A school bus can transport 48 people. For a half day trip, plan to leave the city early in the morning (8:30 or 9:00) to return to the city by 1 p.m. Budget approximately an hour and a half for travel and a few hours at the farm to pick.
4. Offering registration on a first-come, first-serve basis or to having screening criteria increases equity. These trips can be very popular and fill up quickly.
5. Call to confirm participation a few days before the trip and discuss trip details.
6. Provide recipes for the food that was harvested during the trip home.
7. Extra produce can also be integrated into other CHC programs (for example, community kitchens or emergency food programs).
Other key points

- Farms are not always fully accessible for groups with special needs.
- These trips are very popular with families and people of all ages.
- To build on farming/gleaning trip programming, you could consider offering a guided talk about nutrition or the food system.

Resources
North York Harvest Food Bank website: http://www.northyorkharvest.com/gleaning-trips

Appendix

2.1 Food Down the Road: The ABC’s of Local Foods
2.2 Local Crop Availability

“The types of comments that we hear is that people feel connected to nature, to the food system. Many people who are new to Canada have not had the opportunity to leave Toronto.” – Health Promoter
Introduction
The Good Food Box is a means of providing fresh, affordable produce to CHC clients and community members on a year round basis, particularly for areas identified as ‘food deserts’ or for clients with accessibility issues. A variety of types of boxes are available: family size ($18), small size ($13), large organic ($34) or small organic ($24) and a wellness box with pre-cut foods ($13).

Potential Outcomes
- Improved nutrition (increasing access to nutritious and fresh foods)
- Emergency food access (hunger/meeting primary needs)
- Environmental stewardship/food system sustainability
- Outreach Strategy

Steps involved in starting the program
FoodShare requires a minimum of 5 Good Food Box orders to act as a delivery site. Community and CHC advertising and community meetings are a means to gage and gather interest to meet the minimum order. FoodShare is available to come to the CHC with sample boxes to facilitate sign up of clients and community members. One option is to start the first month with a dry run of staff orders.

Program Resources
**Staff time:** 2 hours per week for planning and tracking, availability at pick up
**Program supports:** Space at CHC to house boxes when delivered

Steps involved in running program:
1. The frequency of the program depends on CHC client, staff and community interest. The program is typically run on a bi-weekly or monthly basis. Consider running the program on a busy programming day at the health centre to allow clients to coordinate appointments or group attendance with box pick-up.
2. Individuals provide payment to the CHC in advance of the box drop off as a confirmation of their order. A reminder call or email a few days prior to the delivery date will help with consistency and interest.
Other key points

- Pick-up of the Good Food Box may be a challenge for particular groups. Consider creative ways of reaching individuals who may be at higher risk for food insecurity due to accessibility challenges, such as utilizing volunteer networks or fostering partnerships with tenant representatives.
- Including a recipe for one of the food box fruits/vegetables or offering a cooking workshop in conjunction with the box delivery enhances interest in the program.
- The free Good Food Box (for every 10 orders) can be used for programming, or on a referral basis for clients requiring emergency food provision.

Resources

Food Share Good Food Box ‘how to’: http://www.foodshare.net/goodfoodbox04.htm

Appendix

3.1 Good Food Box process evaluation
3.2 Good Food Box pre-evaluation questionnaire
3.3 Good Food Box satisfaction survey

“Acting as a Good Food Box pick-up site is also a way to connect with the wider community and increase the profile of the CHC.” – FoodShare website

“We choose Ontario-grown products for the box whenever possible because we want to know where and how our food is produced, to support local farmers and reduce the fossil fuels burned when we import food.” – FoodShare website
Introduction

The community food cupboard is intended to provide emergency food access to clients who are in immediate food crisis. While clients can otherwise be referred to community food banks, an emergency food cupboard supports individuals’ experiencing physical, transport and emotional barriers to those services.

Potential Outcomes

- Build partnerships with partner organizations
- Emergency food access (hunger/meeting primary needs)

Steps involved in starting program

Depending on funding availability at the CHC, you may need to gather community food donations to stock the cupboard. Some CHCs conduct a food drive with a local business.

Program Resources

Staff time: Minimal time required, maximum is usually one hour per week
Money: Funding for food purchase, or donations of non-perishable foods
Program supports: Space for a cupboard

Steps involved in running program

1. Develop guidelines for cupboard access and for what food will be accepted. Guidelines are available in the attached appendix.
2. Place cupboard in a discrete area to respect client confidentiality.
3. Clients access the community food cupboard based on referrals from clinical staff. Clinical staff can accompany the client to the food cupboard.
4. Offer the client a private space to pick the food they need from the cupboard, mindful that emergency access also should provide choice. Allowing the client to choose the food they require is a means to de-stigmatize emergency food provision.
5. Provide client with a food access resource sheet as appropriate, including general information about food banks, low cost meals, community gardens and other food programs in the City of Toronto.

Appendix

4.1 Community Food Cupboard Guidelines
4.2 Emergency Food Cupboard Pilot Project (Access Alliance)
Introduction

Various community kitchen models exist that can meet the unique needs of the populations being served, the available facilities at the CHC and in the community, and the skill sets of the participants. The breadth of potential outcomes identified by CHCs running community kitchens reflects this diversity. While a list of basic considerations and required resources are provided, the case examples of how CHCs are organizing community kitchens demonstrate the range of opportunities that community kitchens create.

Some community kitchen models run in CHCs include:

- Women’s Kitchen,
- Youth Kitchen,
- Cooking for one or two people;
- Caregiver and Tot;
- Newcomers Cooking Together, multicultural kitchens, or language-specific;
- Healthy eating on a budget
- Disease or condition-specific;

Potential Outcomes

- Improved nutrition (increasing access to nutritious and fresh foods)
- Develop community ties and connections among participants
- Skill Development
- Mental Health
- Emergency food access (hunger/meeting primary needs)
- Outreach Strategy
- Reduce social isolation
- Maintain cultural identity
- Physical fitness and activity

Resources

Community Kitchen Training at FoodShare - http://www.foodshare.net/kitchen04.htm

Appendix

5.1 Cooking for One or Two Curriculum
5.2 Community Connections Start-up kit
5.3 Community Caterer program
**Flemingdon Health Centre Community Kitchen**

The kitchen began with a few friends of the Community Health Worker (CHW) who came together to socialize and cook. Word of mouth about the program spread, due in part to the attraction of socializing around food, the welcoming atmosphere created by the multilingualism of the health worker and the cultural appropriateness of the food being prepared. Participants prepare the meal together, followed by a health talk by the dietitian.

The community kitchen at Flemingdon has evolved into an annual ‘Taste of Flemingdon’. The festival showcases dishes from both the kitchen programs to community members.

**Staff time:** 1 day/week for CHW, consultation from dietitian,

**Money:** $40/week for food

**Program supports:** Kitchen facilities

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**Fairview Community Health**

With no kitchen at Fairview, the community kitchen is run out of a local church. The kitchen rotates between at least four 6-week curriculums. Additional curriculums are added as needed. Participants actively participate in choosing the menu options and a registration of 15 participants generally results in weekly participation of 12 people. A brief discussion on a food related topic and healthy eating handouts are incorporated into all curriculums. In addition, other discussion topics, guest speakers, or handouts may be provided.

**Staff time:** 1 day/week for staff member, one day per session for planning and evaluation

**Money:** $100/week for food feeds participants and provides leftovers for families (25 to 30 people); $50/week feeds participants with fewer leftovers for families

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**Community Cooking Connections Project**

The Community Services Cooking Connection Project is a collaboration of 16 agencies in the Toronto West region. A Healthy Communities grant was received and the goal of the project is to support the formation and sustainability of resident-led collective kitchens in the York South West riding. The grant will support the development of a training manual, website, and a full time food animator in the community.

“The success of food security programs translates into success for programs unrelated to food security. Getting involved in something like a community kitchen is a gateway into programs such as mental health support that may be more intimidating”
South Riverdale CHC

COUNTERfit Cooking is a community kitchen program at South Riverdale Community Health Centre. The program engages its members in cooking, conversation and meal sharing. On a weekly basis group members - who consist of people who use drugs and/or have mental health issues- meet to prepare a meal, share nutritional and harm reduction information, discuss food issues facing the community, and finally share the meal that everyone has prepared.

The program is part of the larger COUNTERfit Harm Reduction Program which is a community-based project offering outreach and education services to illicit drug users in the Riverdale area. Services offered include needle exchange and distribution of safer injection materials; distribution of safer crack stems; distribution of condoms; women-specific programming, primary health care services; and social work/housing supports. As many of our service users are food insecure and under-housed or homeless, we have been working to develop more food-centered initiatives in South Riverdale. In this effort we have participated in fruit picking outings both within the neighbourhood and to rural farms outside of the city, and have also participated in fruit preserving workshops.

“Coming to a community kitchen is a doorway to feeling confident about integrating into Canadian culture. It provides an activity (cooking and eating) that is comfortable that transitions into other skills”

“The kitchen is really about community support. The kitchen is more than just food – it is also the support that participants develop by talking together and forming networks. Food is a way of talking about other things they are experiencing and bonding the community together”

Community kitchen participants at Fairview Community Health
**Anne Johnston Health Station**

Teens Cooking with BAM (body and mind) began after identifying that eating disorders and body image issues were on the rise for youth. Prevention programs were identified as a gap in service. Research and experimentation lead staff to develop a cooking program for youth that at first glance sounded like fun. The goals of this program are scripted and intentional.

**Staff time:** Health Promoter and Dietitian one day per week  
**Money:** $70 per week for 25 youth  
**Program Support:** Kitchen and one break out room

**Steps involved in running program:**

1. Youth are divided into two groups that rotate between cooking and talking circles.  
2. Healthy meals are prepared and discussions include: healthy food choices, body image and eating disorders. As well, participants choose a variety of topics that range from: addictions, to stressors and coping strategies, resolving conflict, unhealthy relationships, depression, violence, etc. Each session is dedicated to one topic.  
3. Peer Facilitators play a lead role in prompting discussion on the topics and are strong role models in setting the tone for the group.

**Access Alliance Multicultural Health and Community Services**

Newcomers Cooking Together (NCT) is a City of Toronto funded community kitchen program run by the dietitians at Access Alliance through partnerships with several community agencies. Each autumn, six 10-week programs (3 hr/week) run across the city. The focus is on capacity building, peer-leadership, enhancing food skills and healthy eating for newly arrived, marginalized immigrants and refugee families. The program aims to support newcomers living in Toronto’s priority neighbourhoods across the city to make a healthy transition to the Canadian food environment while maintaining cultural food traditions. A recent addition to NCT is our Men’s Edition.

**Staff time:** 1 staff person for 5 hours/week for 10 weeks at six program locations (in the kitchen) from September-December as well as planning and evaluation meetings  
**Money:** Provided through the City of Toronto  
**Program Support:** Fully equipped kitchen (provided from partner agencies); childcare (provided by Access Alliance)  
**Additional Support:** 12 Community Peer Leaders; 18 Undergraduate student cooking volunteers  
**Additional Notes:** Access Alliance has an 11-minute film about their Newcomers Cooking Together Program [http://accessalliance.ca/services/nutrition/newcomers](http://accessalliance.ca/services/nutrition/newcomers)

“I now feel more confident about myself thanks to BAM. I am making healthier choices in my life.” - participant
**Seniors Cooking Club**

Similar to a community kitchen, a cooking club involves a cooking demonstration with some involvement from participants.

**Introduction**

The Seniors Cooking Club brings programming to where people are. Offered as just one piece of the Seniors Health Club that also includes light fitness and talks on health-related topics, participants watch the preparation of a weekly meal in the style of a cooking show. Central to the success of the program is holding activities in the participants’ building.

**Potential Outcomes**

- Heart health
- Reduce social isolation
- Improved nutrition (increasing access to nutritious and fresh foods)

**Steps involved in starting the program**

The cooking club was added when the Seniors Health Club advisory group identified that healthy eating was a challenge due to life transitions, the high cost of fruits and vegetables and food preparation difficulties due to health concerns such as arthritis. The Seniors Health Club began through a grant from ‘Action for Neighbourhood Change’ and is now being expanded to two other facilities through a New Horizons grant.

**Program resources**

**Staff time:** Community Health Worker and a Dietitian for 2 hours programming and 2 hours preparation. The Seniors Health Club coordinator works 14 hours/week.

**Money:** $25/week for ingredients

**Steps involved in running program**

1. The Dietitian purchases groceries and does meal preparation (i.e. chopping) while the Community Health Worker facilities a light fitness session.
2. The Dietitian leads a cooking demonstration of a meal or a snack that emphasizes seasonal foods, lighter meals, and incorporating new fruits/vegetables.
3. Recipes are translated into the primary language of participants and printed.

**Notes:** Some activities of seniors’ cooking clubs could include: Food preparation, food purchasing, development of monthly menus, safe food handling, budgeting, sharing of meals, taking home food parcels, presentations by a doctor, dietitian, or Toronto Public Health.

“The main success of the program is that it is offered in the senior’s building. Many people do not leave the building to attend programs. It also serves to bring people into the main space of the building to socialize”
Introduction

A Good Food Market provides seasonal, local produce to communities that may not have easy access to fresh and affordable food. Markets can be as small as a single stand, and are a good alternative to a Farmer’s market if sales are too low to cover farmer’s costs. In addition to coordinating food delivery, FoodShare provides operational training and support.

Potential Outcomes

- Build partnerships with partner organizations
- Improved nutrition (increasing access to nutritious and fresh foods)
- Reduce social isolation

Program Resources

Staff time: One day per week (2 hours for ordering, 5 hours on site); Volunteers to assist with selling food. The East Scarborough Festival market hires a student full time through the summer to coordinate the market.

Money: $7,000 to $8,000 annually

Program supports: City park permits are waived for priority neighbourhoods.

Steps involved in starting program

Provide enough time to contact and coordinate with FoodShare in time to launch for the spring harvest season. Find an accessible and visible location to ensure market success. A permit may be required if the property belongs to another individual or organization.

Other key points

1. Good Food Markets and Farmer’s Markets are important community gathering spaces. A barbecue, taste testing, entertainment or activities can encourage community participation that extends beyond purchasing food.
2. Promote fruits and vegetables that are in season or plentiful by providing healthy recipes
3. Starting a Farmer’s Market may be a natural next step if a Good Food Market is running successfully at the CHC or in the community. A Farmer’s Market can start small, gradually adding farmers as community interest builds. The Toronto Farmer’s Market Network is a working group of market organizers who can act as a resource and support - [http://tfmn.ca/](http://tfmn.ca/)
Resources

Food Share contact information - http://www.foodshare.net/animators02.htm

Appendix

6.1 Food Share Good Food Market brochure
6.2 Good Food Market Guide: Flemingdon Health Centre
6.3 Market evaluation/survey
6.4 List of Farmer’s Markets in Toronto
6.5 List of Good Food Markets in Toronto

Market volunteers at Flemingdon Health Centre Good Food Market
Market Voucher Program

Market vouchers act as ‘cash’ at Farmer’s markets or Good Food Markets and assist vulnerable community members in accessing fresh, local produce.

Introduction

Market vouchers can be distributed to CHC clients and community members to support the purchase of fresh, local produce for individuals who may otherwise not be able to afford to shop at the market. Vouchers can be distributed as often as the CHC would like, in whatever amount, through the market season or as a onetime event.

Potential Outcomes

- Emergency food access (hunger/meeting primary needs)
- Improved nutrition (increasing access to nutritious and fresh foods)
- Reduce social isolation

Resources

Staff time: If the voucher program staff member also runs the market, the time is folded into market management.

Money: The voucher program at Stonegate CHC began with initial funding of $3000

Steps Involved in Starting Program

If your CHC does not have a Farmer’s or Good Food Market, it will be necessary to develop ties with the manager of a local market, who can explain the program to vendors. It is also helpful to identify community partners (such as the food bank) to distribute vouchers.

Steps Involved in Running Program

1. Vouchers should be durable and non-duplicable. Laminate the vouchers with the market name, time and location, as well as with a tracking number.
2. Determine which clients are eligible for the voucher program based on the CHC criteria.
3. Voucher amounts are suggested to be in denominations of $5 and lower. Small amounts are suggested as no change is given in return for the voucher. At Stonegate, vouchers were initially distributed in packets of $15.
4. If distributing vouchers at the CHC and at other community agencies, have voucher participants sign an agreement outlining voucher guidelines.
5. When distributing vouchers, record voucher # and client name (optional) to better understand who needs vouchers and who does not.
6. On the day of the market, CHC staff member collects vouchers from vendors, reimburses vendors with cash and tracks which vouchers were returned from which vendor.
7. CHC staff member enters voucher #, date spent and where voucher was spent.
Other key points

- A voucher program can increase the interest of lower-income community members in a Farmer’s Market. The voucher can act as an initial gateway into attending the market. After using the vouchers, individuals often return for the opportunity to participate in market activities and make connections with the community.

Resources

List of Toronto Farmers Markets - http://tfmn.ca/?page_id=2

Appendix

7.1 Voucher Example
7.2 Voucher Tracking Sheet
7.3 Voucher evaluation survey
7.4 Voucher letter and agreement

“...We know that when given the option, people choose the healthier one – meaning fresh fruit and veggies over baked goods at the market”
Community Gardens

A community garden is a space on public or private land where clients or community members meet to grow and care for vegetables, flowers and native plant species.

Introduction

Not unlike community kitchens, community gardens follow many models depending on what space is available at the CHC or in the community, how CHC/community partnerships have developed, and client or community interest. The following case stories highlight the different paths that starting a community garden can take.

Potential Outcomes

- Develop community ties and connections among participants
- Improved nutrition (increasing access to nutritious and fresh foods)
- Reduce social isolation
- Skill development or training
- Emergency food access (hunger/meeting primary needs)
- Maintain cultural identify
- Environmental stewardship/food system sustainability
- Diabetes intervention
- Heart Health
- Build partnerships with partner organizations

Resources


Visit FoodShare for a detailed list of resources including:

- Month by month garden start up toolkit - http://www.foodshare.net/toolbox_month01.htm
- 10 tips for starting a community garden - http://www.foodshare.net/toolbox_month07.htm

Bathurst-Finch

The Bathurst-Finch Community Garden was initiated with an Action for Neighbourhood Change (United Way) grant and training support from FoodShare after identifying that the high price of fruits and vegetables was a concern in the community. The CHC took a lead role in advocating, coordinating and navigating City of Toronto regulations to get a community garden started. The garden initially required a significant investment of CHC staff time and support, but after two years the project is almost entirely resident-led. The garden is located close to a primary school in a public park and it is divided into plots that are available to CHC clients and community members. Individuals plant, maintain, and harvest their plot.

**Staff time:** Full time staff member supported by the The Action for Neighbourhood Change project co-ordinates this among other initiatives.

Central Toronto Community Health Centres

An unused space on-site prompted the idea to start a community garden. Transforming the space was supported by a grant from Evergreen, a non-profit organization committed to making cities more liveable. Visioning sessions and consultations with staff and program coordinators assisted in conceptualizing what form the space could take. The final garden was built by Evergreen, and includes both aesthetic and edible plants. A grant from HRSCD supports a summer student gardening coordinator who runs a weekly gardening group and also integrates gardening sessions into other CHC programs. The gardening group is composed of clients referred by CHC counselling staff and clinicians, although broader community participation is encouraged through open houses and garden celebrations. The garden is also utilized by other CHC programs, such as the Four Winds Aboriginal group.

**Staff time:** Full time gardening coordinator.

“**The health of the environment is a big component of our health. Being in a garden, thinking about what our impact is on the planet, we see the connections. All of the gardening group are keen environmentalists – that part of people emerges when they are involved in gardening activities.**”

CTCHC Garden

Stonegate Garden
**South Riverdale CHC**

**Blake School Food Garden Project**

SRCHC in partnership with Blake Street Public School has created a school-community food garden. The garden is a collaborative effort of community parents, school aged children, teachers, garden educator and community members coming together to create a space for learning, engaging and addressing issues of food, health and the environment.

**Key project objectives:**
1. Establishing a food garden; that focuses on heirloom and culturally specific plant varieties; to provide hands-on learning and skill development linked to school curricula
2. Engaging school aged children in curriculum linked to food-based garden activities
3. Promoting healthy eating and living and reinforcing nutrition education
4. Establishing a school wide compost system for education, demonstration purposes and supporting the garden
5. Increasing parent and family engagement among marginalized populations through food as a vehicle for community education and involvement
6. Increasing community pride, connection and safety through positive use of public space

**Project Highlights:**
- 230 children and 60% of parents participated in garden design selection
- 10 classrooms participated in planting seeds and caring for seedlings
- At school funfair parents led a number of activities from a children’s art project, collecting data to giving away plants
- Garden ceremony attracted local community leaders, Local MPP, community members, parents and the entire school body
- The first harvest was modest – a wide range of herbs and vegetables were grown and shared amongst the women that maintained the garden over the summer
- School children harvested fall herbs and vegetables including potatoes, kale and beans

**South Riverdale CHC Roof Top Garden**

In 2003, the outdoor patio space on the fourth floor of SRCHC was converted into a roof top garden. Community members and staff constructed wooden containers to grow vegetables, herbs and edible flowers. The garden group is composed of clients and community members. The garden group meets every 2 weeks from spring to fall to discuss gardening, healthy eating and well being.

A snack is prepared using ingredients from the garden. A number of workshops are provided covering a range of topics from vertical gardening to medicinal herbs. Garden members are actively involved in shaping and caring for the garden.

**Staff time:** Part-time coordinating position taken on by existing staff. Gardening consultant contract position (funding dependent)

“The community garden is also about community participation and socialization. It is important to let go of the result of how many pounds of food are grown and to embrace the process. Food production is just a small part of the garden.”
Flemingdon Health Centre, Fairview Community Health

Peer-led container gardening workshop

In conjunction with Livegreen Toronto, agencies from North Toronto sponsored clients to receive training in container gardening. Communities were chosen due to the high rates of apartment living and a demonstrated interest from residents. Participants then received resources to run container gardening workshops in their communities.

Staff time: Minimal time to assist peer leaders in posterering and facilitation
Money: Depending on scale of program: could purchase containers, seeds, soil, handbooks, etc. Participants can also provide their own resources.
Program supports: Space to run program, snacks - peer leaders may supply this

Access Alliance Multicultural Health and Community Services

Prairie Drive Park Community Garden: Established in 2012 at Prairie Drive Park, across the street from Teesdale Place on Pharmacy Avenue. This garden is sponsored by Access Alliance Multicultural Health and Community Services (AAMHCS) and the Neighbourhood Action Partnership (NAP), specifically a working group known as the NAP Garden And Food Access Strategy Working Group.
AAMHCS is one of a large number of agencies working together in the NAP, which also brings together residents who are interested in working on projects that advance the interests of people in community. Plots measure 10’x20’ and the garden is divided into 20 plots. There are 20 members in year one and there will be 40 members in year two.
Membership: Gardeners must reside in the Taylor Massey area. Priority will be given to apartment dwellers with no access to ground level space for gardening including backyards and other community gardens.
The Taylor Massey neighbourhood houses people of mixed income, many of whom are living in the apartment complexes of Teesdale Place and Crescent Town. This neighborhood is one of 13 Toronto neighborhoods designated as “at risk” by the United Way report, Poverty by Postal Code.

Staff time: None. Volunteer coordinators are selected from garden members.
Money: N/A. In-kind donations from local business, in-kind staff support from member agencies of NAP Food and Garden Access Strategy Working Group.
Program Supports: Garden coordinators liaise with the group at large on a daily basis, and with the NAP on a monthly or as needed basis. Any conflicts or complaints will first be dealt with by the coordinating group before being brought to AAMHCS or to NAP. The initial establishment of the garden was supported by the City of Toronto Community Gardens Program.

Collaborative Projects

Growing Healthy Together: A Gardening Program to Improve Mental Health, Physical Activity and Healthy Eating

In 2011 Central Toronto Community Health Centres, Flemingdon Community Health Centre and South Riverdale Community Health Centre partnered to create the a gardening program that would suit the needs of individuals at their health centres. The result was Growing Healthy Together, a community gardening program focused on improving mental health, physical activity and healthy eating through gardening. They received a two year Healthy Communities Fund grant through the Province of Ontario and hired a community garden coordinator who was able to plan and deliver workshops and activities at all three sites. In 2012 they added a new site, House of Compassion, long term housing for people with severe and persistent mental illness. They are currently in the process of developing an outcome evaluation tool and a manual of gardening activities that can be used in similar programs.
Introduction

The Stonegate CHC School Snack Program runs throughout the school year and is delivered to two local schools. Snacks are delivered to all students at both schools on a weekly basis. The centre believes that it is instrumental to ensure that school children receive the food they need to grow and learn, and the snack program helps to build a sense of caring and community trust. The purchase of snacks for the program is funded by donations made to the health centre. We rely on the generosity of our community to ensure that the program continues to support healthy eating habits in our children.

Potential Outcomes

- Improved nutrition (increasing access to nutrition and fresh foods) for children
- Develop ties to local schools (outreach strategy)

Steps involved in starting program

Partnership with, and support of, the school principal is key to starting the program. The Stonegate CHC School Snack Program is donation based and thus the CHC has to ensure that adequate donations are coming in for continuation of the program. Once a partnership and funding is established, staff time is relatively minimal.

Program Resources

Staff time: Weekly delivery of snacks to school depends on school size, 2-3 hours each week. The snacks are pre-approved or recommended by a dietitian.

Money: The program can be run based on donations or through TDSB Nutrition Program with partnership with school. Stonegate CHC roughly estimates 30 cents per student for snacks.

Steps involved in running program

1. Staff orders, purchases, packages and delivers weekly snacks to participating schools.
2. Snack-specific educational materials are occasionally handed out and CHC staff contribute to the school newsletter with tips on healthy eating for busy families.
3. Staff organize and implement an annual “Food Fun Day” at local schools with fun educational booths (how to make a healthy snack, where does your food come from, etc.)

Measurement/Evaluation

- Principals, teachers and classrooms are given an annual survey of the program.
Diabetes Programs

There are a diverse array of diabetes programs run at CHCs throughout the province. Rather than attempt to synthesize this diversity, we are highlighting a few programs.

Central Toronto CHC
Central Toronto CHC runs an Aboriginal Wellness Program called Four Winds. The program emphasizes healthy eating to prevent and control diabetes. Every session incorporates a healthy meal that is cooked with the help of peers. The sessions also have an elder who is present to smudge and hold a circle. Health education is done either through talks with a dietitian or with SOADI (Southern Ontario Aboriginal Diabetes Initiative) or more informally with the nurse or health promoter on site.

South Riverdale CHC
DECNET (Diabetes Education Community Network of East Toronto) supports self management of Pre-diabetes and Type 2 Diabetes.

Programs offered include:
- Group education classes
- Community kitchens (offered in English and Chinese)
- Diabetes support groups (offered in English and Chinese)
- Mental Health program with focus on diabetes
- One-to-one support from nurses, dietitians and social workers.

Community kitchen programs help clients to increase their cooking skills and confidence in preparing diabetes-friendly meals and knowledge regarding healthy shopping. Further, care providers connect clients with available food resources in the community. DECNET is developing a group for people living with mental health issues and diabetes with a gardening component. Also in the planning stages of a community garden for our clients in the neighbourhood of Victoria Park and Danforth.

LAMP CHC
LAMP is part of the West Toronto Diabetes Education Program (WTDEP): a comprehensive Diabetes Education Program that has been in operation since 2002 partnered with Access Alliance CHC; Four Villages CHC; Davenport Perth Neighbourhood Centre; Central Toronto CHC; and Stonegate CHC.

Education sessions provide practical information on diabetes with support and tools. Sessions are co-facilitated by a Registered Dietitian and Registered Nurse. Topics include:
- Introduction to Type 2 diabetes,
- Oral medications and insulin,
- Meal planning, shopping and food labels
- Social eating and dining out
- Stress Management and Emotional Eating

Free group programs are offered to encourage physical activity and to educate clients and community members on managing their diabetic condition. Doctor’s referrals are not needed to attend the programs. Some activities occur at LAMP, while others occur at partner sites.
**Flemingdon Health Centre**

*DMDEP (Don Mills Diabetes Education Program)* runs at Flemingdon Health Centre. A registered Dietitian and Nurse provide individual counseling (for Type 2 diabetes and Pre-diabetes) and group sessions.

The following group sessions are offered:

- For people with Type 2 diabetes, pre-diabetes and those at risk
- In small groups at convenient locations in the community
- In English, Urdu, Tamil, Farsi, Mandarin and other languages with interpreter assistance if required
- In the morning, afternoon and evening
- Workshops (support/review groups with guest speakers, stress management, Ramadan classes, Label Reading, Carbohydrate counting)
- Walking group (seasonal)
- Cooking classes (seasonal)

Started in 2009, the *South Asian Diabetes Prevention Program (SADPP)* is an evidence-based diabetes prevention project. SADPP aims to prevent diabetes in the SA community with the goal of enabling seniors to be in control of their health by learning if they are at risk of developing diabetes, attending workshops, and receiving a diabetes prevention care kit.

This program runs early-detection clinics and workshops for the South Asian population in the community. The team consists of a registered nurse, registered dietitian, outreach workers, and a program coordinator. The program is delivered in the community and the team travels to places of worship, community centers, events, or groups to conduct clinics and to raise awareness about diabetes by offering culturally and linguistically relevant workshops focusing on diabetes prevention and healthy lifestyle modifications.

Those who are at risk of developing diabetes are referred to their family physician for further check-up. Those who are identified as living with diabetes without access to management services are referred to local services, support groups or diabetes education programs.

**Regent Park CHC**

The Regent Park Community Health Centre (RPCHC) was established in 1973. It is a non-profit, community-based organization dedicated to improving the health of Regent Park area residents and the community as a whole, by providing high quality, integrated primary health care services, health promotion services and community capacity building. Our priority is to reduce the health inequities experienced by low-income, immigrant & refugee, non-status and marginally-housed & homeless populations.
The Regent Park Diabetes Education Centre health team consists of two registered nurses and two dietitians, all of whom are certified diabetes educators. The team provides diabetes education to adults living in the Regent Park area and surrounding neighbourhoods to help prevent or manage Type 2 diabetes or pre-diabetes. Patients can be self-referred or referred from another health service.

Programs offered include:

- Weekly exercise classes, including Tai Chi, yoga, strength and stretch
- Workshops that are designed to help people learn how to cook and prepare healthy meals, as well as grocery store tours designed to help people shop for healthy ingredients on a budget
- Education groups on a variety of nutrition-related topics (e.g., healthy eating for Ramadan, diabetes foot care, diabetes basics, monthly insulin start group)

We run groups in various languages, including Tamil, Somali, Vietnamese, Bengali, to meet the needs of the population and to provide culturally appropriate and inclusive diabetes care. Interpenetration services are provided for any clients or groups that require it.
While many CHCs run food-based programs for their clients, providing programs and services is not a sufficient way to address the many underlying determinants of food insecurity. CHCs have a mandate to address the root causes of poor health and to actively promote good health and disease prevention: many CHCs engage in advocacy campaigns in order to carry out this mandate. The following advocacy campaigns are a sample of some of the many campaigns CHCs are engaged with.

**Put Food in the Budget**

The Put Food in the Budget campaign calls for an immediate increase of $100/month Healthy Food Supplement for every adult in Ontario who receives social assistance and for social assistance rates that reflect the real cost of housing, food and a life of health and dignity. Organizations and groups in thirty communities around Ontario participate in the campaign.

The campaign has developed a range of creative tools and actions that support the leadership of people living on social assistance, build bridges with supporters and allies and that increase the pressure on the provincial government to take action on this issue; for example, community meetings with MPPs to ask for their support for an increase to social assistance rates, a “Do the Math” online survey asking people to estimate how much it costs to live in their communities and compare those costs with the rates of social assistance; and a “Do the Math Challenge” asking people throughout the province to attempt to live off of a food hamper diet for one week and blog about their experiences.

Most recently, thousands of Valentine cards and Christmas-themed postcard were sent to the Minister of Finance and to the Premier. As a challenge to the austerity agenda evident in the lead up to the 2012 provincial budget, a tour of a life-sized Dalton McGuinty mannequin was organized for people to tell the Premier what austerity and continuing inadequate social assistance rates means for them. CHCs are participating by campaigning with their people who they work with and the Association of Ontario Health Centres.

**Special Diet Campaign**

A group of community agencies, including a number of CHCs, have been active in trying to get the Ontario government to re-instate the special diet allowance for social assistance recipients. Through postcard and letter-writing campaigns, rallies, and meetings with MPPs and community groups, CHCs are involved in attempting to ensure that people with a special diet allowance (including clients of CHCs) are able to maintain that allowance.
Growing Food and Justice for All Initiative (GFJI)

Regent Park CHC is working with GFJI striving to create a network of activists who are working toward a just food system and world. We are a group of individuals, organizations and institutional partners aimed at dismantling racism and empowering low-income and communities of color through sustainable and local agriculture, but also linking with parallel social and environmental movements. This comprehensive network views dismantling racism as a core principal which brings together social change agents from diverse sectors working to bring about new, healthy and sustainable food systems and supporting and building multicultural leadership in impoverished communities throughout the world.

Food Procurement Guidelines

The West-End Urban Health Alliance is a group of agencies in western Toronto. Their dietitians network has created a sample set of guidelines for food procurement and healthy eating in CHCs. These guidelines have been adapted from Toronto Public Health and Canada’s Food Guide. 4 Villages CHC brought these guidelines to the Food Security Network and currently various CHCs are in the process of adopting these guidelines in their centre. The process of adoption of the guidelines involves internal advocacy on the part of staff to their respective management teams and to the managers and executive directors via their own specific networks. The work of advocating across specific CHC management networks was undertaken by the co-chairs of the GTA Food Security Network. This supported each representative on the network as each member took the policy back to their respective Centres for adoption.

Using the healthy eating guidelines developed by WEUHA and adapted from Toronto Public Health, Unison is in the process of developing a Healthy Eating Protocol for clients and employees of the centre. The protocol will be supplemented with a “buy right, eat right” brochure for staff to use when purchasing food for group sessions. Planned implementation is for Fall of 2012.

Resources:

8.1 Food Procurement Guidelines
8.2 Grub it up flyer
8.3 Put Food in the Budget information
8.4 Special Diet Campaign information
8.5 Additional Advocacy Campaigns
Resources
Extensive research has explored the relationship between food security and health. Recently released reports from Toronto Public Health and the Metcalf Foundation offer a system-oriented approach to addressing food and food systems issues. Despite this surge in interest, much room remains to better understand the impact of community food initiatives on addressing food insecurity. The following is a selected list of useful references.

Reports

Dietitians of Canada: Position on Community Food Security and Position on Individual and Household Food Insecurity in Canada.

Scharf, K., Levkoe, C. and Saul, N. (2010). In every community a place for food: The role of the community food centre in building a local, sustainable, and just food system. Toronto, Ontario: Metcalfe Foundation.

Nutritious Food Basket reports, Toronto: http://www.toronto.ca/health/food_basket.htm
Refer to the cost nutritious food basket when grant-writing, program planning and advocating. Then, compare with money available for food, highlights the woeful inadequacy of current incomes to support healthful eating. All health units collect this data.


Journal publications


Resources

Influencing Policy

Three of the top ten deprivation indicators are food related. This index contributes to the tool used by government to track progress in poverty reduction.

2. Ontario Poverty Reduction Strategy:
Direct energy to support initiatives toward poverty reduction, remind decision makers that they have a commitment to poverty reduction, analyze the indicators, see where CHCs can track numbers/data to inform decision-making.

3. Thought About Food? A Workbook on Food Security & Influencing Policy
http://www.foodthoughtful.ca/
Thought About Food? Is a workbook that incorporates ideas, insights and advice from people involved in food security issues and actions across Canada. It is intended to provide tools and information to inspire communities to come together and act to make food security a reality for everyone. The goal of this workbook is to give people in communities across Canada tools and the power to raise awareness about food security and to think about actions to influence both policies and systems to address food security issues more effectively.

Influencing Policy Worksheets (From: Thought About Food? A Workbook on Food Security & Influencing Policy):
http://partcfood.msvu.ca/section5/5.1.pdf  - Identifying the Problem
http://partcfood.msvu.ca/section5/5.3.pdf  - Identifying the Policy processes, tools, makers

4. Who’s Hungry Report, Daily Bread Food Bank 2010 Profile of hunger in the GTA
This research report is generated annually from over 1700 face-to-face interviews with food bank clients. It is used to inform ongoing community-based research.
Resources

Websites

*Food Secure Canada* is a Canada-wide alliance of civil society organizations and individuals collaborating to advance dialogue and cooperation for policies and programs that improve food security in Canada and globally - [http://foodsecurecanada.org/](http://foodsecurecanada.org/)

*The Stop Community Food Centre* is a community food centre with a mission to increase access to health food in a manner that maintains dignity, builds health and community, and challenges inequality – [http://www.thestop.org/links](http://www.thestop.org/links)

*FoodShare* works to improve access to affordable and healthy *food* from field to table - [http://www.foodshare.net/](http://www.foodshare.net/)

*Ryerson Centre for Studies in Food Security* lists research, education and dissemination initiatives to inform policy development and community action. Project listing available at - [http://www.ryerson.ca/foodsecurity/projects/](http://www.ryerson.ca/foodsecurity/projects/)

The *Toronto Food Policy Council* partners with business and community groups to develop policies and programs promoting food security. The Food Policy Council has produced 15 discussion papers articulating a food systems approach to public health policy - [http://www.toronto.ca/health/tfpc_discussion_paper.htm](http://www.toronto.ca/health/tfpc_discussion_paper.htm)

The *Community Food Security Coalition* is a U.S. non-profit coalition representing over 300 organizations. Visit their website for a wealth of publications on a community food security approach - [http://www.foodsecurity.org/pubs.html](http://www.foodsecurity.org/pubs.html)

*Bits&bytes: [http://bitsandbytes.ca/](http://bitsandbytes.ca/)* Community food security resources at your fingertips.

*Toronto Community Garden Network: [www.tcgna.ca](http://www.tcgna.ca).* A grassroots network of community gardeners across the city.

Funding Sources

The following selected funding sources have provided funding for food security projects for some Community Health Centres.

*Ontario Trillium Foundation*
*Evergreen*
*Carrot Cache (Carrot Common)*
*Spark Community Advocacy (Heart and Stroke)*
*Aviva Community Fund*
*Toronto Parks and Trees Foundation*
*Healthy Communities (Ministry of Health Promotion and Sport)*
*Clean and Beautiful Secretariat (City of Toronto)*
Appendices
PURPOSE
FAIRVIEW FOOD SECURITY NETWORK is a group of community based organizations and city-wide agencies committed to increasing access to nutritional and culturally acceptable food for children, youth, adults and seniors living in this community within the following boundaries: Yonge Street, Steeles Avenue, Victoria Park Avenue and Lawrence Avenue. The Fairview Food Security Network is a subcommittee of the Fairview Interagency Network.

We focus on:
1. Addressing emergency food needs in the area
2. Building upon and developing neighbourhood food resources
3. Affecting policy change towards a sustainable food system
4. Tracking the demographics of food insecurity in the neighbourhood

CURRENT ACTIVITIES
A. Establishing a Sustainable Food Bank/Food Centre for Neighbourhood
   • Link with potential partners and resources
   • Find a suitable space
   • Assist with developing funding proposals in partnership to sustain foodbank
   • Promote the services of partner organizations in the community
   • Develop innovative and efficient ways of using existing resources and/or creating new services and initiatives that build on community strengths and address existing and potential needs and risks

B. Promote Local Food Resources and Food Security Issue
   • Analyze and share trends, issues, local demographics, community resources and programs
   • Promote and distribute existing food resources in area via guide and ‘who’s hungry’ fact sheet to all agencies and local schools in neighbourhood
   • Increase community engagement and support public education and advocacy on local food needs/issues that have been identified

C. Promote broader food security advocacy measures at the local level
   • Support ‘Put Food in the Budget’ campaign
   • Support ‘Special Diet Allowance’ campaign
   • Support anti-poverty initiatives

GUIDING PRINCIPLES
1. ensure community and resident engagement throughout our work
2. be responsive to the community and emerging needs and opportunities
3. work from a holistic community strengths based approach
4. ensure transparency of our collective work
5. member organizations to actively support the goals and objectives of the network
Appendix 11

Fairview Food Security Network Terms of Reference

NETWORK STRUCTURE

- The Food Security Network is a sub-committee of the Fairview Interagency Network
- At times, the Food Security Network may have sub-working groups that meet separately to focus on a particular issue

MEMBERSHIP & DECISION MAKING

- Membership should be representative of the community
- Open to any organization or agency serving the catchments’ area as well as local tenant groups that supports the Terms of Reference, including, informal local groups or residents of the community (Membership Form)
- Each participating resident, agency, organization and service etc has one vote
- Decisions are made on a consensus basis wherever possible, however when decision making is prolonged or a consensus is not possible then a vote may be held with a simple majority if those attending making a decision (51%). A minimum of 5 members must be present for decisions to be made.
- Conflicts of interest must be declared at the beginning of each meeting and exclude the organization or resident from having voting privileges or being part of the decision making process.

MEMBERSHIP RESPONSIBILITIES

- Commitment to and in agreement within the Terms of Reference of the Fairview Food Security Network
- Attend the bi-monthly meetings (about 4-5 meetings a year) or give regrets to a Co-Chair
- Minute taking is shared and rotated. Minutes are distributed by e-mail in advance of meetings
- Chair person (or Co-Chairs) is selected annually (June or September annually)
- Agendas are set by Chair with input from all members
- Annual work plans identifying one or two priority issues or projects and implementation plans to be developed and evaluated. Work plan and accomplishments to be reviewed and documented
- Longer term strategic planning to be done every 3 years in conjunction with the Fairview Interagency Network
- Fairview Food Security Network minutes and agendas and committee lists reports and other documentation to be kept with one of the Membership partner agencies as decided by the Network

Drafted March 2010
History of the Network:
In January of 2007 Davenport Perth Neighbourhood Centre, Central Toronto Community Health Centres (CHC), and South Riverdale CHC staff came together to form a CHC Food Security Network. As a first task the members surveyed Toronto CHCs to determine capacity and need to outreach to new members. An advocacy statement was developed. In the fall of 2007 the first Network meeting was convened.

Introductory Statement:
CHC’s are uniquely positioned to address issues of food security, as it is a determinant of health. The Network understands food security as encompassing:

Food and Health: community and individual health and wellness, illness prevention and management etc.

Food and Access: income, cultural appropriateness, dignity, choice, proximity etc.

Food and Sustainability: environment, food production and agricultural practices etc.

Statement of Purpose:
The CHC Food Security Network is a coordinating group of multidisciplinary health providers in the CHC sector. We understand food security as encompassing food and health, food and access, and food and sustainability; we provide leadership, support, education and advocacy to address how these issues impact our communities.

Network Objectives:

Advocacy: Participate in and support advocacy initiatives that impact food security

Build Capacity: Identify opportunities for improving network member and community capacity. Encourage sharing among and within CHC’s

Community Response: Support program planning and service delivery in response to community food security issues

Research: Support and lead food security research

Recruitment and Membership:
Current Membership is focused on CHC’s in the GTA. Members are CHC staff with an interest in food security. Annually, with the support of the membership, invitations will be sent to CHCs who are not currently represented at the Network. It is important to maintain the interdisciplinary nature of the Network. Students may attend as guests, and are not to be considered full members. Students may participate in all meeting discussions. Members are not to send students to attend in their absence
**Accountability:**
The Network is accountable to:
- The organizations that its members represent
- Any funding sources which support the Network’s initiatives
- Partner groups

**Responsibilities:**

**Co-chairs:**
Network members select two co-chairs from among the membership for terms of two years. Positions are held by individuals, not organizations. Chairs will rotate out on opposite years. The co-chairs are responsible for meeting notification, agenda preparation, meeting facilitation, invitations to other CHCs and ensuring that the Network follows the work plan.

**Members:**
Recording of meeting minutes will be rotated alphabetically by first name between group members.

Other responsibilities are outlined in the work plan.

**Logistics:**
Meetings will be held the second Thursday of every second month from 1-3pm. Location of meeting will determined upon availability, interest to host and location.
External Food Access Committees can bring local residents, community stakeholders, and CHC staff together to identify neighbourhood food security issues and concerns and to in turn develop appropriate and meaningful community based responses.

**Committee Members**
Connect with community food focused individuals/groups who are interested in addressing food access and hunger issues in your local community.

*Potential committee members could include:*

- agencies/individuals in the local community running community food programs (local church groups, child care agencies, food bank, community gardens, farmers’ market)
- volunteers involved in assisting with food programming at your CHC
- local schools and representative from councillor’s office
- residents participating in CHC community food programs (participants in community kitchens, community gardens, etc.)
- interested and available CHC staff

**Role of Committee**
An external committee can be a sounding board for CHC staff regarding food access programming or as involved as assisting with planning community food events. The choice is up to you!

*Potential committee activities include:*

- identifying issues and concerns impacting local residents regarding food access
- developing and assist with the implementation of appropriate and meaningful grassroots responses to those issues, which may include advocacy, social action, fundraising, and or specific project planning and implementation
- outreaching to local residents to generate awareness and support around CHC food related programming
- planning and implementing community food related initiatives with other community stakeholders

**Time Line**
Meeting frequency depends on the need and availability of committee members
Internal Food Access Committees can bring awareness to CHC clients, management, and staff of the importance of food security as a determinant of health. The committee can initiate and maintain a variety of food access programs to serve clients within the centre and the greater community.

Committee Members
- Assess interest among staff members of joining a group addressing food access and hunger issues.
- This can be done through all-staff or team meetings, e-mail, paper flyers or posters.
- Committee members can also include volunteers such as students, clients, and peer leaders who may be assisting with food programming at your CHC.

Role of Committee
An internal food access committee can be a forum for generating ideas to improve the health of clients through food security. This type of committee serves well in a centre that has little or no food access programs or initiatives currently running.

Potential committee activities include:
- Develop vision, goals, objectives for the committee
- Identify issues and concerns impacting clients regarding food access
- Initiate and develop food access programming such as:
  - Become a Good Food Box delivery stop
  - Community kitchen (food capacity and access group)
  - Community garden or container gardening on health centre property
  - Bus trips to local farms
  - Good Food Market stands
  - Work with cooks/kitchen that purchase and serve foods for drop-ins, shelters, free or low-cost community meals to improve nutritional and cultural quality of foods.

Time Line
Meeting frequency depends on the need of maintaining programming and availability of committee members.
The SRCHC Food Security Committee believes that Food Security encompasses:
- Food & Income/access (poverty, culturally appropriate)
- Food & Health (food related illness and maintenance of good health)
- Food & Sustainability (environment, agriculture etc)

Vision for the SRCHC Community
Promoting access to healthy food for all people in the SRCHC catchment, while supporting a strong, local, and ecologically sound food system.

Vision for the Organization
SRCHC as an organization is a model for promoting healthy, local, environmentally sustainable food practices within the Centre as well as the community at large.

Goals
1. To educate about food security and healthy, sustainable food within the Centre.
2. To develop and implement food procurement policy for the Centre.
3. To support and integrate existing food security initiatives.

Objectives
1. To develop a food procurement policy.
2. To develop a work plan within the constraints of the current budget.
3. To educate and engage staff and service users on food security issues.

Evaluation
The work of the Committee will be evaluated on an annual basis to ensure goals and objectives are being achieved.

Membership
Ideally membership would have representation from all teams and at least one management member.

Meetings
The Committee will meet once every two months, unless otherwise scheduled.

Chair
Rotate once a year

Minutes
Minutes will be recorded and responsibility for taking minutes will be rotated amongst committee members. Minutes will be distributed to members prior to meeting dates.
Appendix 2.1

Food Down the Road: The ABC’s of Local Food

From biotechnology to local foods, let’s explore the vast array of food options available on our local produce market. This ABC’s of Local Food guide will help you navigate the world of local foods and the benefits they offer.

A
Ask where your food comes from and how it was grown. Among the advantages of eating locally grown foods, the opportunity to get answers about your food is a top priority. Do you know where your food comes from? Do you trust the sources you choose to use?

B
Biotechnology and the risks it poses. Health Canada, the Canadian Food Inspection Agency, Environment Canada, and Environment Canada have joint responsibility to regulate biotechnology-related products, which can involve the application of science or engineering to our food. The National Science Board is among the responsible groups that belong to the Canadian Biotechnology Information Network (www.cbanet.ca), a coalition of groups from across Canada that are concerned about the risks posed by genetic engineering.

C
Community gardens. Nothing grows like a garden. You have an apartment in your yard and it’s too shady for vegetables to grow. There are community gardens in your neighborhood. You can grow your own vegetables, herbs or flowers for your own use or to donate to a community food provider or some other good cause. Contact your OFRIO (www.ofrio.org) for more information on community gardens in your area.

D
Dressings. Break free of commercial salad dressings by making your own. Experiment with variations of vinaigrettes and oil dressings or blend based on your taste. Here is an easy recipe from the Horsemeat Cookbook, Follow That:

Ceramic Cultural Dressing

- 1 cup ramekin
- 2 tbsp garlic, finely chopped
- 2 tbsp olive oil
- Salt, pepper, and herbs to your liking.

Combine all ingredients well and keep refrigerated.

E
Eating. When it comes to food, let’s be responsible eaters. Multifarious in our diets is a great way to accommodate our needs and to support our local economy. A great way to do this is by preparing food in our own way, the way we enjoy it, the way we like it.

F
Fennel. A highly aromatic perennial herb, fennel has a flavor similar to anise or licorice. The stems are shaped somewhat like a flattened oak leaf, which has long, narrow leaves. The stems, leaves, and seeds of fennel are used in Middle Eastern and Indian cooking and in a variety of foods, such as soups, stews, and fish and vegetable dishes. Our family has a delicious recipe of fennel soup that was passed down to us from my great-grandfather.

I
In season. Eat blueberries in blueberry season, strawberries in strawberry season, and tomatoes in tomato season. Out of season, you can still eat locally by planting root vegetables in a cold storage area and freezing fruits, apples, and vegetables. Storing small, and following the “slop/slop” recipe for a simple, nutritious meal, there is a simple salad recipe that doesn’t require cooking:

Salsa Verde

- 1 jalapeño
- 1 cup chopped onion
- 1 cup cilantro leaves
- 1 tbsp fresh lime juice
- 2 cloves garlic

2 jalapeño peppers, stemmed, seeded, and chopped

Heat oil in a sauté pan

Sauté green onions and garlic until soft.

Add jalapeño peppers and sauté until tender.

Serve warm or at room temperature.

J
Justice. Everyone has the right to food security — the ability to access a variety of culturally appropriate foods, with sufficient resources for good health and at an affordable price. Our food systems want to feed everyone’s food needs are met.

K
Kabobs. A little-known, hearty dish that can cut down on waste, meat, and oil, it is a combination of vegetables, meats, and bread. Mix the ingredients together and grill to perfection. A great way to introduce new flavors into your diet.

Sauces and herbs. Sauces and herbs are the secret to good cooking. A variety of sauces and herbs are used in cooking, and a great way to use them is to add them to your dishes. For more on local herbs and sauces, see The Importance of Local Herbs by Kathleen Reinhartt on page 12.
Appendix 2.1

Food Down the Road: The ABC’s of Local Food

Ladies. Beneficial insects, like ladybugs, are natural enemies of pests. They feed on aphids, spittlebugs, and various other small insects that are harmful to plants. To attract and protect ladies, where possible and where pests are abundant, plant nectar plants and other plants that provide food for beneficial insects.

Preventing foliar diseases from affecting your food production. Potato blight is one of the most common foliar diseases that can affect vegetable crops. Use certified disease-free seed potatoes and provide good air circulation around the plants.

Quesillo, the traditional Mexican cheese, is a mild cheese that is typically used in quesadillas and other dishes. It is made from cow's milk and has a mild, creamy flavor. Quesillo is a popular cheese in Mexico and is often used in savory and sweet dishes.

Rooftop gardens are an essential part of the green revolution in urban areas. They provide a source of fresh produce and contribute to the urban environment by reducing the city's heat island effect.

Shoehorn. A shoehorn is a tool that is used to help a person put on a shoe. It is a simple tool that consists of a flat, narrow piece of wood or plastic with a handle on one end and a smooth surface on the other. It is used to guide the heel of the shoe into the shoe, then the toe, and finally the rest of the shoe.

Tunips are a hardy, nutritious vegetable that is grown in early spring. They are drought tolerant and require minimal care. Tunips are a good choice for cold climates and can be grown in a variety of soils.

Yeast. Every time you eat or try to make your food the yeast or yeast cells in your food can reproduce. Yeasts are a type of fungus that are commonly used in the production of bread, wine, and other foods.

Zest. Every time you eat, try to make your food the taste of your eating. Start with a small whole fruit or vegetable, like a strawberry or a banana, and bite into it. The taste, smell, and texture will give you an idea of the actual physical, chemical composition of the fruit or vegetable you are eating. Would you like to celebrate, appreciate and enjoy your food? You are partners.
## Appendix 2.2

**Typical Local Crop Availability for Ontario**

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[www.pickyourown.org](http://www.pickyourown.org)
Appendix 3.1

Good Food Box Evaluation

Thank you for taking the time to fill out this evaluation. Your answers will help us in making sure that the Good Food Box program is meeting your needs, as well as identify areas in which we need to improve. All responses will be kept confidential. Please answer the following questions as indicated.

Which Good Food Box did you order?
- Small Good Food Box
- Good Food Box
- Small Organic Box
- Wellness Box
- Fruit Box
- Large Organic Box

Please rate the Good Food Box in the following areas:

<table>
<thead>
<tr>
<th>Poor</th>
<th>Fair</th>
<th>Average</th>
<th>Good</th>
<th>Excellent</th>
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</table>

- Freshness
- Quality
- Selection
- Value for the money

Are you satisfied with the pick-up location of the Good Food Box? Yes  No
If no, do you have any suggestions on how to make the Good Food Box more accessible?
________________________________________________________________________________________
________________________________________________________________________________________

Have you encountered any problems in getting your Good Food Box so far? If so, what were they?
_______________________________________________________________________________________
_______________________________________________________________________________________

Has the Good Food Box increased the quantity of fresh fruits and vegetables in your home?

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<tr>
<td>Strongly Agree</td>
<td>Agree</td>
<td>Undecided</td>
<td>Disagree</td>
<td>Strongly Disagree</td>
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</table>

Overall, how satisfied are you with the Good Food Box?

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<td>Very Satisfied</td>
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<td>Not Sure</td>
<td>Dissatisfied</td>
<td>Very Dissatisfied</td>
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7.) Would you recommend the Good Food Box to a friend or family member? Yes  No

8.) Do you have any other suggestions on how to improve the Good Food Box program?
_______________________________________________________________________________________
_______________________________________________________________________________________

Thank-you!
Appendix 3.2

Good Food Box Pre-Evaluation Questionnaire

Thank you for taking the time to fill out this evaluation. Your answers will help us to assess the effectiveness of the Good Food Box program. All responses will be kept confidential.

1.) How did you hear about the Good Food Box?
   - From a staff member at The Anne Johnston Health Station
   - Saw display at The Anne Johnston Health Station
   - Saw flyer (please specify where): ________________________
   - Family or friend
   - Other (please specify): ________________________________

2.) What is your gender?
   - Male
   - Female
   - Other
   - I would prefer not to say

3.) Are you a client and/or program participant at The Anne Johnston Health Station?
   - Yes
   - No
   - I would prefer not to say

4.) Please indicate which population you identify as belonging to:
   - Youth (13-24 years of age)
   - Barrier Free (person with a physical disability)
   - Senior (55 years of age or older)
   - Other

5.) How many servings of fruits and vegetables do you eat a day?
   - 0 - 3
   - 4 - 6
   - 7 - 10
   - 10+
   - I don’t know

6.) Do you think you need to increase your daily intake of fresh fruits and vegetables?
   - Yes
   - No
   - Maybe
   - I don’t know

7.) On average, how much do you spend on fruits and vegetables per week?
   - $0 - $10
   - $11 - $20
   - $20+
   - I don’t know
   - I would rather not respond

8.) How many people are there living in your household? (please include yourself)
   - 1
   - 2
   - 3
   - 4
   - 5 or more
   - I would rather not say

9.) Here are some challenges that may prevent people from not buying fresh fruits and vegetables. Which of these statements apply to you? (please check all that apply)
   - I cannot access a grocery store on a regular basis (i.e. lack of transportation, mobility issues, etc.)
   - I don’t have enough time to grocery shop
   - I don’t know how to cook and/or prepare fresh fruits and vegetables
   - Fresh fruits and vegetables spoil too quickly
   - I don’t always know what to buy or what is healthy
   - I find that fresh fruits and vegetables are too expensive
   - I don’t have any challenges
   - Other (please specify):

10.) Where do you usually buy your fresh fruits and vegetables? Please pick one.
    - Large chain grocery stores (i.e. Dominion, Sobeys)
    - Local corner markets
    - Farmers Markets
    - Online
    - I don’t buy fresh fruits and vegetables
    - Other (please specify):

______________________________
Appendix 3.3

Good Food Box Participant Satisfaction Survey

1. **How many times per month do you order the Good Food Box?**
   - Once
   - Twice

2. **What is your? (Please check)**
   - Age:
     - Youth (16 – 24 years)
     - Adult (25 – 64 years)
     - Senior (65+)
   - Gender:
     - Male
     - Female

3. **How many people share the box that you order?**
   - 1
   - 2
   - 3
   - 4
   - 5 or more

4. **What are the main reasons you purchase a Good Food Box?** (check all that apply)
   - Freshness
   - Quality
   - Low cost
   - Convenience
   - Supporting local farmers
   - Connection to your community
   - Helping myself /my family to eat better
   - Other:

5. **Do you use the recipes in the newsletter? If so, do you:**
   - Try all the recipes
   - Try most recipes
   - Sometimes try the recipes
   - Never try the recipes

6. **Where else do you get your food from each month (other than the Good Food Box)? Please check all that apply.**
   - Supermarket
   - Small grocery store
   - Health food store
   - Food bank
   - Convenience store
   - Department store (Wal-Mart, Costco, etc)
   - Farmers’ Market
   - Other (please indicate):

7. **What is your approximate annual household income?**
   - Less than $10,000
   - $10,000 to $20,000
   - $20,000 to $40,000
   - $40,000 to $70,000
   - More than $70,000

8. **The Good Food Box helps me:** (Please check all that apply)
   - Feel healthier
   - Save $ on groceries
   - Eat more fruit/vegetables
   - Eat new kinds of produce/food
   - Increase variety of your menu (recipes)
   - Other:

9. **The Good Food Box ordering process is easy and hassle free.** (Please rate on a scale of 1 – 5, 1 the least and 5 the greatest)
   - 1 (not satisfied)
   - 2
   - 3
   - 4
   - 5 (very satisfied)

10. **The Good Food Box pick-up process is convenient for me.** (Please rate on a scale of 1 – 5, 1 the least and 5 the greatest)
    - 1 (not satisfied)
    - 2
    - 3
    - 4
    - 5 (very satisfied)

11. **Do you have any suggestions for improving the Good Food Box program?**

12. **Are you interested in participating in other Stonegate CHC Community Food Programs? Please check all that apply.**
    - Cooking workshops
    - Gardening workshops
    - Community Gardening

13. **If you would like us to contact you regarding other Stonegate CHC Community Food programming, please give us your contact information:**
    Name: ____________________  Phone Number: ____________________
    Email Address: ____________________

Stonegate CHC
What are the principles that guide this program?
The Anne Johnston Health Station is committed to the social determinants of health, including food security. Food security is a condition in which people can obtain a safe, culturally acceptable and nutritionally adequate diet. We recognize that individuals may become food insecure. For this reason, we will make use of the extensive network of food access programs around the city and will refer clients to these programs as needed.

What is the purpose of this program?
This food program is called the Community Food Cupboard (CFC). The purpose of this program is to provide an emergency supply of food to clients who are experiencing a food crisis. Clients do not have to pay for food they receive.
A food crisis is when a client:
- Expresses immediate hunger, or
- Discloses that they have no food at home, or
- Discloses that they have no money to buy food, or
- Cannot access a local or emergency Food Bank on the same day
The cupboard is meant to provide an emergency supply of food only. Clients will be referred to food access programs (e.g. food banks) in their local area for further support.

Schedule
The Anne Johnston Health Station’s Community Food Cupboard will be open to registered clients and program participants, under the supervision of a service provider, during regular centre hours.

Location
The cupboard will be located in the kitchen, which is located in the basement of AJHS.

What kind of food is needed and where will it come from?
Non-perishable foods are needed. Donations are welcome from clients, staff, community members and organizations.
Most needed food items are:
- Peanut butter
- Canned fruits or vegetables
- Canned fish or meat
- Dry pasta, rice and other grains
- Tomato sauce
- Lentils and other canned or dried legumes
- Cans of soup or hearty stew
- Powdered, canned or tetra pack milk or milk alternative
- Fruit and vegetable juice, tetra paks
- Crackers
- Cereal
- Dried fruits and nuts
- Pudding cups made from skim milk
- Milkshakes that do not need to be refrigerated
Other healthy snack items (i.e. sugar free Jell-o, unsweetened applesauce, granola bars)
How will the program work?
1. Food donations will be kept in the Community Food Cupboard, where it will be stored until accessed by client(s) accompanied by an AJHS staff member. Bags will also be stored in the cupboard.
2. If an AJHS provider assesses the need for a referral to the food cupboard, an emergency supply of food will be given. Staff will use their discretion when distributing food to clients. Staff will strive to supply the client with enough food to sustain them until they are able to access a food bank, provided that there is enough food available for distribution in the Community Food Cupboard.
   - Individual provider assesses the need for referral to the food cupboard, obtains key from front reception, and escorts client to food cupboard. Provider signs the tracking sheet (in cupboard), noting date, providers name, client chart number, number of adults and children in their household (this information will be used for statistical purposes) as well as checking off goods given to client
   - Provider locks-up food cupboard once client leaves and returns key to receptionist
   - Clients may access the food cupboard up to a maximum of once per month.
   - Access to the cupboard is limited to AJHS registered clients (primary care and program participants).
   - Pattern users (use on monthly basis) will be redirected to other service providers (dietitian, social worker, etc.) to help fulfill individual needs as appropriate. Health Promotion Team to be consulted for appropriate responses.
3. Staff will provide client with a food access resource sheet as appropriate, which includes general information about food banks, low cost meals, community gardens and other food programs in the City of Toronto.

Administration of the Cupboard
The health promoter will be responsible for stocking and tracking use of the cupboard. The dietitians will be consulted regarding donations and items to be purchased to ensure they are healthy and nutritious.

Who can you contact if you have a problem, concern or question about the program?
Dietitian or Health Promoter

How will this program be evaluated?
The Community Food Cupboard Tracking Form will be reviewed as necessary. The following will be assessed:
- Were clients referred to Food Access Programs?
- Was an internal referral made?
- Were there enough food items to give to clients?
- Food items distributed
- Number of individuals/families that use the cupboard on a monthly basis
Appendix 4.2

Emergency Food Cupboard Pilot Project

Access Alliance Multicultural Health and Community Services
Week 1:
1. Introductions and Ice Breakers (Name and Favourite Food)
2. Kitchen Guidelines
   - Dates, Times, Location
   - Structure (cook together, eat together, 3 people stay to clean up, take leftovers home)
3. Kitchen Safety
   - Hand Hygiene
   - Safe meat and dairy handling
   - Safe knife handling
   - Washing up with soap
   - Garbage divisions
4. Canada’s Food Guide
   - The guide is mostly about finding balance in your diet
   - Also provides some guidelines around portion size and dietary requirements by age and sex
   - General good food guidelines are also included, such as choosing whole grains and lower-fat dairy and protein
   - Some people will have their own requirements (e.g. if they are diabetic or on a low-sodium diet). Speak with your doctor about these needs.
5. Eating alone
   - Make the effort to have a nice environment around you when you eat (music, placemat, etc)
   - Try some no-cook meals if you don’t feel like a big process
   - Make plans to meet with friends, neighbours and family for meals
6. Plan meal exchanges with your neighbours
Week 2: Shopping for One or Two: Planning

- Make a shopping list – use Canada’s Food Guide to help make sure you have a balanced list
- Planning your meals in advance for the week will help you decide what quantities you need of each ingredient
- Buying food in season is often cheaper and also is a good way of getting the most nutritional value out of your food. Food that has been grown locally also will have higher nutritional value, since it has used less time to travel to your store.
  - The Fairview Farmers’ Market in the spring-fall is a good way of purchasing local food in season
- Fruit can be divided into three categories: Ripe, Medium, Green
  - Ripe should be eaten right away – you can use the others as they ripen
- For larger ingredients (e.g. broccoli, large cuts of meat that are on sale),
  - Plan how you may use that ingredient in multiple dishes throughout the week
  - Plan to divide it with a friend
  - Plan to freeze some
- Buying frozen vegetables will help you use the quantity desired for each recipe without letting any produce go to waste
  - Frozen produce is usually frozen at the height of the harvest and retains most of the nutritional benefits of fresh produce
  - Canned produce is also an option for people looking to use smaller quantities, but canned fruits or vegetables often contain high levels of sugar or salt. Buy produce packed in water instead of oil and without added sugar and salt
- Bulk stores allow you to purchase the quantity you would like
- Packaged and/or ready-made foods can be purchased for convenience and can be complimented by other foods (such as fresh fruit, milk, or bread)
  - Keep in mind that prepared foods are often higher in salt, sugar, and fat, and lower in nutritional content than fresh or frozen whole foods
  - Try and have at least three of the four food groups in each meal
- Some products last longer (rice, dried cereals, canned goods) and may be stored in your kitchen.
  - It is a good idea to use all dried and canned goods within a year of purchase. A good way to remember is to change these products during daylight savings time each year
- See handout on “emergency food shelf”
  - Helpful for days when you can’t make it out to the store, or when you just need one thing, or if there is a weather or power problem
Week 3: Meal preparation made easy

- You might be used to cooking for a larger family – but you can still cook good, nutritious meals for one or two people!
- You don’t have to eat the same thing each day of the week – you can still have a diverse diet if you’re cooking for a smaller group
- Many recipes can be halved so that they produce less portions
- Libraries and bookstores carry books with recipes specifically for 1-2 portions
- Ready made foods (frozen, canned, or otherwise packaged) may help you with meal preparation
- Smaller pots and baking pans might make it easier for you to prepare reasonable portions and divide leftovers
- Planning for one-pot meals (chili, soup, casseroles) is easier for clean up
- Some meals don’t have to be cooked (e.g. sandwiches, salad)
- Blenders, food processors, and/or choppers may make things easier to cut vegetables
- Easy meals to make? What do people like to make at home?

Meatless Main Dishes

One of the reasons we eat meat, fish, poultry and eggs is because they are excellent sources of protein. An alternative is to choose food from plants containing "vegetable protein". Vegetable protein sources include a variety of legumes (dried peas, beans and lentils) and nuts. Split pea soup, baked beans and peanut butter sandwiches are popular food choices which are good sources of vegetable protein.

These are nutrient dense foods—excellent sources of protein, vitamins and minerals. They are low in sodium and fat, contain no cholesterol and are high in dietary fibre. They digest slower than many foods so they satisfy hunger longer, yet their calorie count is modest.

TIPS:
- Dried peas and beans are much less expensive than canned. However, canned beans are already cooked and may be more convenient to use.
- Grocery stores may sell dried beans in bulk so you can buy small amounts
- Read the label on peanut butter jars! Choose brands without added salt, fat or sugar, or the word "hydrogenated" on the label.
- Once a jar of peanut butter is opened, keep it in the refrigerator.
- Store dried peas and beans in a cool, dry place. They will keep almost indefinitely.

NOTE: Some people find beans and their relatives "gassy". Navy beans and lima beans are the most gassy. Lentils and split peas are less gasy. Products prepared with sugar or molasses (like baked beans) are the most problematic. Usually your body will condition itself to better digest beans if you choose to eat them more frequently. A product called Beano® is helpful; taking a few drops with your first spoonful of beans eliminates the problem of gas for most people.
Appendix 5.1

Cooking for One or Two Program Plan

Week 4: Leftovers

- Immediately refrigerate any leftovers and use them within three days
- If you know that you’ll be using the same ingredients in another meal, you can chop up extra and keep for the next day (e.g. extra veggies from soup for a salad the next day, or a few extra boiled potatoes to make potato salad)
- Look at hand-out for ideas on using leftovers for new meals
  - E.g. make pasta salad and chili after spaghetti dinner
  - E.g. puree cooked vegetables with broth or milk to make a quick soup
  - E.g. chop leftover chicken with mayonnaise for a chicken salad
- Leftovers should only be reheated once in order to be food-safe
- Reheat leftovers to original cooking temperature for food safety reasons
- Having freezer bags and plastic or glass freezer-proof containers on hand is also helpful if you want to make larger meals and freeze some servings for later
  - Frozen goods should be labeled with their contents and date of freezing
  - Freezing foods in individual portions will make defrosting easier and faster
  - Most foods will defrost overnight in the refrigerator – this is the safest place to defrost frozen foods
  - Frozen foods may lose some flavor and texture if left in the freezer too long.
Week 5: Preserving Foods

See freezing/refrigeration chart for times per type of food

<table>
<thead>
<tr>
<th>Foods</th>
<th>Usual Use</th>
<th>Condition After Thawing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cabbage, celery, cress, cucumbers, endive, lettuce, parsley, radishes</td>
<td>As raw salad</td>
<td>Limp, water-logged, quickly develops oxidized color, aroma and flavor</td>
</tr>
<tr>
<td>Cooked macaroni, spaghetti or rice</td>
<td>When frozen alone for later use</td>
<td>Mushy, tastes warmed over</td>
</tr>
<tr>
<td>Egg whites, cooked</td>
<td>In salads, creamed foods, sandwiches, sauces, gravy or desserts</td>
<td>Soft, tough, rubbery, spongy</td>
</tr>
<tr>
<td>Meringue</td>
<td>In desserts</td>
<td>Soft, tough, rubbery, spongy</td>
</tr>
<tr>
<td>Milk sauces</td>
<td>For casseroles or gravies</td>
<td>May curdle or separate</td>
</tr>
<tr>
<td>Sour cream</td>
<td>As topping, in salads</td>
<td>Separates, watery</td>
</tr>
<tr>
<td>Cheese or crumb toppings</td>
<td>On casseroles</td>
<td>Soggy</td>
</tr>
<tr>
<td>Mayonnaise or salad dressing</td>
<td>On sandwiches (not in salads)</td>
<td>Separates</td>
</tr>
<tr>
<td>Fried foods</td>
<td>All except French fried potatoes and onion rings</td>
<td>Lose crispness, become soggy</td>
</tr>
</tbody>
</table>

- To freeze foods:
  - Wrap them tight in foil or in freezer clingwrap or a freezer ziploc bag
  - Food can also be stored in air-tight Tupperware containers
- Blanching
  - Vegetables should be blanched (quickly and lightly cooked) before freezing
  - To blanch, bring a big pot of water to boiling and lower a wire basket of vegetables into the boiling water. Let water return to boiling and count the minutes
  - Once enough time has elapsed, remove the basket and plunge it into a bowl of very cold water
  - Drain vegetables thoroughly before freezing
  - Freeze in Ziploc bags or airtight containers
  - See blanching times below:
Appendix 5.1
Cooking for One or Two Program Plan

<table>
<thead>
<tr>
<th>Vegetable</th>
<th>Blanching Time (minutes)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Asparagus</td>
<td></td>
</tr>
<tr>
<td>Small Stalk</td>
<td>2</td>
</tr>
<tr>
<td>Medium Stalk</td>
<td>3</td>
</tr>
<tr>
<td>Large Stalk</td>
<td>4</td>
</tr>
<tr>
<td>Beans-Snap, Green or Wax</td>
<td>3</td>
</tr>
<tr>
<td>Beets</td>
<td>cook</td>
</tr>
<tr>
<td>Broccoli (flowerets 1 1/2 inches across)</td>
<td>4</td>
</tr>
<tr>
<td>Brussel Sprouts</td>
<td></td>
</tr>
<tr>
<td>Small Heads</td>
<td>3</td>
</tr>
<tr>
<td>Medium Heads</td>
<td>4</td>
</tr>
<tr>
<td>Large Heads</td>
<td>5</td>
</tr>
<tr>
<td>Carrots</td>
<td></td>
</tr>
<tr>
<td>Small (baby)</td>
<td>5</td>
</tr>
<tr>
<td>Diced, Sliced or Lengthwise Strips</td>
<td>2</td>
</tr>
<tr>
<td>Cauliflower (flowerets, 1 inch across)</td>
<td>3</td>
</tr>
<tr>
<td>Corn (on the cob)</td>
<td></td>
</tr>
<tr>
<td>Small Ears</td>
<td>7</td>
</tr>
<tr>
<td>Medium Ears</td>
<td>9</td>
</tr>
<tr>
<td>Large Ears</td>
<td>11</td>
</tr>
<tr>
<td>Eggplant</td>
<td>4</td>
</tr>
<tr>
<td>Greens</td>
<td></td>
</tr>
<tr>
<td>Collards</td>
<td>3</td>
</tr>
<tr>
<td>All Other</td>
<td>2</td>
</tr>
<tr>
<td>Mushrooms Whole (steamed)</td>
<td>5</td>
</tr>
<tr>
<td>Buttons or Quarters (steamed)</td>
<td>3 1/2</td>
</tr>
<tr>
<td>Slices (steamed)</td>
<td>3</td>
</tr>
<tr>
<td>Okra</td>
<td>3-4</td>
</tr>
<tr>
<td>Peas-Green (in pod or loose)</td>
<td>1 1/2-3</td>
</tr>
<tr>
<td>Peppers-Sweet Halves</td>
<td>3</td>
</tr>
<tr>
<td>Strips or Rings</td>
<td>2</td>
</tr>
<tr>
<td>Pumpkin</td>
<td>cook</td>
</tr>
<tr>
<td>Rutabagas</td>
<td>3</td>
</tr>
<tr>
<td>Soybeans-Green</td>
<td>5</td>
</tr>
<tr>
<td>Squash-Summer</td>
<td>3</td>
</tr>
<tr>
<td>Squash-Winter</td>
<td>cook</td>
</tr>
<tr>
<td>Sweet Potatoes</td>
<td>cook</td>
</tr>
<tr>
<td>Turnips or Parsnips Cubes</td>
<td>2</td>
</tr>
</tbody>
</table>
To defrost foods:
- Plan ahead and let it defrost overnight in the refrigerator or defrost in the microwave
- You can also cook meat and casseroles from frozen, although it will take 1.5 times longer

Helpful tips:
- Divide food into personal-sized portions and thaw out only what you will eat in one meal
- Label foods with name, date of preparation, and any specific notes (e.g. cooking time and temperature from frozen)
- Frozen vegetables should be cooked from frozen without thawing
Special Meat Loaf Muffins  Serves 2-3

- 8 oz lean ground beef
- 2 tbsp skim milk powder
- 1/4 cup bread crumbs
- 1/2 tsp salt
- 1/4 cup tomato sauce
- 1/2 teaspoon dried basil
- 1/8 teaspoon black pepper
- 1/4 cup grated cheese
- 1/4 cup quick cooking rolled oats or oat bran
- 1 egg
- 2 tbsp onion, finely chopped
- 2 tbsp Worcestershire sauce
- 1/2 teaspoon garlic powder
- 1/2 tablespoon dried parsley
- 1/4 cup grated cheese

1. Mix all ingredients except cheese together, adding sufficient tomato sauce to moisten.
2. Pack into a small loaf pan or casserole or make individual servings in a muffin tin.
3. Spread a small amount of tomato sauce and sprinkle cheese on each serving.
4. Bake the loaf at 350°F (180°C) for 30 minutes and the individual servings for 20 minutes.

Cabbage Slaw  Serves 2

- 1/2 cup cabbage, shredded
- 2 tbsp raisins
- 2 tsp lemon juice
- 1 tbsp mayonnaise
- 1/2 cup carrot, grated
- dash salt
- 1/2 tsp sugar

1. Lightly toss all ingredients except mayonnaise until well combined.
2. Chill until ready to serve.
3. Just before serving toss with mayonnaise.

Variations:
Fresh vegetables and fruit as well as seeds and nuts may be used to replace part or all of the grated carrot in this recipe:
- Fruits: diced apples; oranges; pineapple; grapefruit
- Vegetables: shredded red cabbage; brussels sprouts; finely sliced celery; green pepper; red pepper; green onions
- Other: peanuts; almonds; walnuts; sunflower seeds; sesame seeds; currants; date pieces

Suggestion for completing the meal: Cabbage Slaw, whole wheat bread, a glass of milk, and an apple

Pizza  Serves 2

- 1/2 can tomato sauce or pizza sauce (7 1/2 oz/215 mL)
- 1 garlic clove, minced
- dash pepper
- 2 English muffins, pitas, bagels or other small bread or individually-sized pizza dough
- 1 tbsp onion, finely chopped
- 1 tbsp oregano, basil and/or Italian seasoning
- 3-4 oz Mozzarella cheese, shredded

1. Preheat oven to 350°F (180°C).
2. In a small bowl combine tomato sauce, onion, garlic and seasonings.
3. Split muffins in half and arrange on a pan. Spread each half with 2 tbsp tomato sauce mixture. Top with 1/4 of the cheese.
4. Bake 15-20 minutes until cheese is melted and pizzas are heated through.

Variations:
- Meat: Add 2 to 3 oz (60-90 g) cooked, drained hamburger, pepperoni, chopped chicken breast, bacon, or luncheon meats (cooked ham, turkey, etc.) and reduce the amount of cheese by half.
- Cheese: Mozzarella cheese can be replaced by your favourite cheese (e.g. feta, goats cheese, old cheddar, parmesan)
- Vegetables: e.g. steamed broccoli, peppers, olives, sun-dried tomatoes, mushrooms, zucchini, eggplant, asparagus, spinach
- Fruit: Try pineapple, peaches or pears for a new flavour

Suggestion for completing the meal: Tossed salad and a piece of fruit
Appendix 5.2

Community Kitchen Training and Start-up Manuals

The following resources are available from Unison Health and Community Services:

- ‘Community Kitchen Start Up Kit Manual’ (translated into Spanish, Somali, Vietnamese and Portuguese)
- ‘Community Kitchen Facilitator Training Program’
- Community Kitchens Website: cookingconnections.ca

Contact Karima Kassam: karima.kassam@unisonhcs.org

Flemingdon Health Centre also has an evidence-based community kitchens manual. Contact Indubala Shekhawat: ishekhawat@fhc-chc.com
Flemingdon Health Centre (FHC) started the Community Caterer Program in 2008 for community residents who enjoy cooking and are interested in starting a small catering business. FHC supports participants by sponsoring them to obtain the Food Handling Course certificate, providing them with space, seed funds towards the startup of their business and by teaching fundamental skills such as meal planning and budgeting.

Freshly prepared lunch is served onsite once a week at affordable prices for staff and community members to enjoy! Large catering orders are also accepted.

The program was also featured in the City of Toronto’s Food Strategy report as an example of how to make food a centerpiece of Toronto’s green economy and need to support community based businesses.

**Potential outcomes:**
- Provides opportunity to enhance cooking and nutrition skills/knowledge
- Employment opportunities
- Community based business
- Creates environment that promotes healthy eating among staff and community residents
- Community caterer provides catering services for the AGM and other special events.

**Support needed:**
- Consultation with nutritionist to review meal plans/recipes
- Funds to support completion of Food Handling Certification
- Promotion and outreach
- Start up funds
- Access to kitchen space
Good Food Markets are community markets that sell high quality, affordable fruits and vegetables. These markets bring healthy produce to neighbourhoods where it might not otherwise be available, and where farmers’ markets are not viable because sales are too low to cover farmers’ costs.

Good Food Markets feature seasonal, local produce plus imported favourites in order to offer the greatest quality and cultural value to the neighbourhoods they serve. Each market uniquely reflects its community and is a vibrant and important gathering place.

FoodShare works in partnership with community organizations and neighbourhood leaders to run the markets. We pass on tools and provide training and ongoing support to community partners and residents who manage all the operational aspects of the market.

On market day, FoodShare delivers top-quality fresh produce which we purchase from local farmers and from the Ontario Food Terminal.

There are now 17 Good Food Markets in communities across the City of Toronto with demand for many more.

In 2008, we heard from market shoppers that because of these markets, 52% of adults and children are eating more fruits and vegetables, 35% prepared home cooked meals, 37% reported feeling significantly healthier, 47% said they got to know more of their neighbours and overall, 98% felt that the market had improved their neighbourhood.
Flemingdon Health Centre has created a Good Food Market Guide for CHCs. Contact Catherine Pestl for more information: cpestl@fhc-chc.com
**WIN A PRIZE!**

Fill out a Stonegate Farmers Market Shopper Survey!

*Market organizers are conducting a survey to see how we are doing and to learn how we can improve the market. All responses will be kept in strictest confidence. We sincerely appreciate your time!*

---

**WIN A PRIZE:** To be entered in the market draw, please fill out the following information.

Name:_____________________________ Phone:_____________________________________

Email:__________________________________

---

1. **How often do you generally visit the market?**
   - Once a week
   - Every two weeks
   - Once a month
   - Rarely
   - First time at market

2. **How much money will you spend today at the market (estimate)?**
   - Under $5
   - $6 - $10
   - $11 - $20
   - $21 - $30
   - More than $30

3. **How many people are you buying food for?**
   - Just myself
   - My family 2 - 4
   - My family 4 or more

4. **Are the prices reasonable for you at the market?**
   - Yes
   - No
   - Somewhat

5. **What brought you to the market today?** (Check all that apply)
   - Quality of products in the market
   - Competitive pricing of products in the market
   - Can find products here that can't be found elsewhere
   - Socializing with friends and/or vendors
   - Entertainment/event
   - Other:_________________

6. **As a result of buying & shopping at the market are you?** (Check all that apply)
   - Buying & eating more fruits & vegetables
   - Buying & eating new kinds of food
   - Saving money on groceries
   - Buying & eating more foods traditional to my culture/background
   - Feeling healthier
   - More aware of what's going on in the community
Appendix 6.3
Market Survey

7. How did you hear about the market? (Check all that apply)
   " Market Flyer        " Community newspaper        " Community agency        " Family member/friend
   " Visited / found the market myself        " Other, please specify: __________________________

8. What kind of produce would you like to see at the market? (Check all that apply)
   " More Vegetables: What kind?____________________     " Poultry & Eggs
   " More Fruit: What kind?__________________________
   " More Organic Produce: What kind?________________
   " More Prepared foods: What kind? _________________    " Other, please specify: __________

9. How satisfied are you with the market overall on scale of 1-5 (1 least - 5 greatest)
   " 1 (not satisfied)        " 2        " 3        " 4        " 5 (very satisfied)

10. What are some suggestions for how the market can be improved?

11. Do you live in the Stonegate Community? 12. Do you live in:
    " Yes        " No        " An apartment building        " House

13. Would you like to receive email updates from us about: (please check)
    " Stonegate Farmers’ Market        " Stonegate Community Health Centre Programs & Services

    If so, please let us know your email address to forward our communication to.

    Email:__________________________________________
Appendix 6.4

Farmer’s Markets in Toronto

Appletree Market
200 Eglinton Ave. W.
Thursdays, 11am-7 pm, April to October
Lesley Stoyan and Chris Trussell, managers:
lesley@dailyapple.ca

Bloor-Borden Farmers’ Market
Green P lot, Lippincott and Bloor St.
Wednesdays 3-7 pm, June to October
fmo@farmersmarketsontario.com

East Lynn Farmers’ Market
1949 Danforth Avenue, near Woodbine (in East Lynn Park)
Thursdays, 3 – 7 pm, June to October
fmo@farmersmarketsontario.com

Etobicoke Farmers’ Market
Etobicoke Civic Centre, 399 The West Mall
Saturdays, 8 am – 2 pm, June to November
John Fulton, manager: jefulton@toronto.ca

Fairview Mall Farmers’ Market
1800 Sheppard East (Don Mills and Sheppard)
Tuesdays and Fridays, 9 am - 6 pm, May to October
Ignazio Natoli, manager: inatoli@rogers.com

Leslieville Farmers’ Market
Jonathan Ashbridge Park, Queen St. E at Woodward
Sundays, 9 am - 2 pm, June to October
info@leslievillemarket.com

Metro Hall Farmers’ Market
55 John Street, near King St.
Thursdays, 8 am - 2:30 pm, May to October
Gary Johnson, manager: info@ontariofarmfresh.com

North York Civic Centre Farmers’ Market
Mel Lastman Square, 5100 Yonge St.
Thursdays, 8 am – 2:30 pm, June to October
Marlene McKay, manager: willowtreefarm@sympatico.ca

Ryerson University MyMarket
Gould Street, East of Yonge St
Tuesdays 3 pm–7 pm, June to October
www.my-market.ca

St. Lawrence North Farmers’ Market
92 Front Street East (at Jarvis)
Saturdays, 5 am – 5 pm, Open all year
Jorge Carvalho, manager: market@stlawrencemarket.com

BirchCliff Village Farmers’ Market
1512 Kingston Road (east of Warden)
Fridays, 3 – 7 pm, June to October
Gail Ross, manager:
gail@marketsbythebluffs.com

Dufferin Grove Organic Farmers’ Market
873 Dufferin St. (in Dufferin Grove Park)
Thursdays, 3 – 7 pm, Open all year
Anne Freeman, manager: market@dufferinpark.ca

East York Farmers’ Market
East York Civic Centre, 850 Coxwell Ave
Tuesdays, 8 am – 2 pm, May to November
Sue Francis, manager: sfrancis@toronto.ca

Evergreen Brick Works Farmers’ Market
550 Bayview Ave (between Prince Edward Viaduct (Bloor/Danforth) & Pottery Road)
Saturdays, 8 am - 1 pm, May to October
Elizabeth Harris, manager: ehriss@evergreen.ca

Guildwood Village Farmers’ Market
The Guild Inn, 191 Guildwood Parkway
Thursdays, 2-6:30 pm, June to October
Gail Ross, manager:
gail@marketsbythebluffs.com

Liberty Village Farmers’ Market
Liberty St – Atlantic Ave
Sundays, 9 am - 2 pm, June to October
fmo@farmersmarketsontario.com

Montgomery’s Inn Farmers’ Market
4709 Dundas West, Etobicoke
Wednesdays 3pm-7pm, May to October
Market manager: Kate Hill at khill4@toronto.ca

Nathan Phillips Square Farmers’ Market
Nathan Phillips Square, 100 Queen St. W.
Wednesdays, 8 am – 2:30 pm, June to Oct
Cathy Bartolic, manager:
cathy@ontariofarmfresh.com

Riverdale Farm Farmers’ Market
201 Winchester (in Riverdale Park)
Tuesdays, 3 – 7 pm, May to October
Elizabeth Harris, manager: elizharr@rogers.com
Appendix 6.4
Farmer’s Markets in Toronto

Sherway Farmers’ Market
North Parking Lot, Corner of 427 and The Queensway
Fridays, 8 am - 2 pm, May to October
Deborah Cauz, manager: cauz@primus.ca

Sorauren Park Farmers’ Market
40 Wabash Ave. at Sorauren
Mondays, 3-7 pm, May to October
Ayal Dinner, manager: ayal@westendfood.coop

The Stop’s Green Barn Farmers’ Market
The Green Arts Barn, 601 Christie Ave.
Saturdays 8am - 12pm, year-round
Cookie Roscoe Handford, manager: cookieroscoe@gmail.com

University of Toronto Farmers’ Market
University College, 15 King’s College Circle, in the rotunda
Wednesdays, 2 pm - 5 pm September to April
Mark Trealout, manager: kawarthaecogrowers@gmail.com

Withrow Park Farmers’ Market
725 Logan Ave (in Withrow Park)
Saturdays, 9 am - 1 pm, May to October
Roberta Stimac, manager: info@withrowpark.ca

Sick Kids Hospital Farmers’ Market
555 University Avenue
Tuesdays, 9 am – 2 pm, June to October
fmo@farmersmarketsontario.com

Stonegate Farmers’ Market
194 Park Lawn Road (At The Queensway),
St James Humber Bay Anglican Church
Tuesdays, 4 – 7 pm, June to October
Julia Graham, manager:
julia.graham@stonegatechc.org

Trinity Bellwoods Farmers’ Market
1053 Dundas St West (Northwest corner of Trinity Bellwoods Park)
Tuesdays, 3 - 7 pm, May to October
Carolyn Wong, manager: carolyn_w@primus.ca

University of Toronto Scarborough Farmers’ Market
Parking Lot 4, 1265 Military Trail (Morningside and Ellesmere)
Wednesdays 3—7pm, May to October

Weston Farmers’ Market
GO Train Parking lot, John St. (Weston Rd. & Lawrence Ave W.)
Saturdays, 7 am - 2 pm, May to October
John Kiru, manager: farmersmarket@westonvillagebia.com

Www.tfmn.ca
Appendix 6.5
Good Food Markets in Toronto

Bathurst Finch Market
140 Antibes, North York
*Wednesdays 3pm—7pm, Seasonal*

Stop Community Food Centre
1884 Davenport Road
*Tuesdays 4 pm – 7 pm, Year Around*

Community Food Market
31 Shoreham Drive, Shoreham P.S.
*Thursdays 3 pm- 7 pm*

Byng Market
3330 Danforth Ave
*Thursday 10 am – 1 pm, Year around*

Firvalley Warden Woods
74 Firvalley Ct
*Wednesdays, 1 pm – 4 pm, Year Around*

Women’s Habitat
140 Islington Avenue
*Tuesdays 1 pm - 4 pm, Year Round*

Teesdale Warden Woods
40 Teesdale
*Friday 1:30pm – 3:30pm, Year Around*

The Learning Enrichment Centre Market
116 Industry St.
*Thursday 12 pm- 3 pm, Seasonal*

Sprint Market
140 Merton St.
*Friday 12:30 pm– 3:30 pm, Seasonal*

Flemingdon Community Market
150 Grenoble
*Thursdays 2:30 pm – 6 pm, Seasonal*

LAMP Community Services
Lakeshore Village Park
*Wednesdays 4:30 pm - 7:30 pm, Seasonal*

South Riverdale Community Health Centre
955 Queen St. E
*Tuesdays 3 pm– 7pm, Seasonal*
Appendix 7.1
Market Voucher Example

Voucher example:

$ 1

Stonegate Farmers' Market
June 22nd - October 5th, 2010 - Tuesdays, 4 - 7 pm
194 Park Lawn Road
(in the parking lot of St. James Anglican Church)
**Appendix 7.2**

**Voucher Tracking Sheet**

Voucher Tracking Sheet Example:

<table>
<thead>
<tr>
<th>Voucher #</th>
<th>$</th>
<th>Location Given</th>
<th>Staff Referral</th>
<th>Client Name</th>
<th>Date Used @ Market</th>
<th>Vendor</th>
</tr>
</thead>
<tbody>
<tr>
<td>236</td>
<td>$5</td>
<td>Foodbank</td>
<td>N/A</td>
<td>John Smith</td>
<td>July 25, 2009</td>
<td>Demkomart - conventional produce</td>
</tr>
<tr>
<td>237</td>
<td>$5</td>
<td>Stonegate CHC</td>
<td>Julia Graham</td>
<td>Jane Smith</td>
<td>August 3, 2009</td>
<td>From These Roots - jam vendor</td>
</tr>
</tbody>
</table>
Appendix 7.3
Voucher evaluation survey

Stonegate Farmers’ Market $ - 2010 Survey

1. Are you:  □ Male  □ Female

2. What is your age?  □ Under 30  □ 30 – 50  □ 50 - 65  □ 65+

3. Did you use all market $ at once or did you spread it out over several trips?  □ All at once  □ Spread out over several trips

4. Do you have any left over market $?  □ Yes. If yes, why did you not use it? ____________________________
   □ No

5. Did you spend any of your own money in addition to the market $?  □ Yes  □ No
   If yes, approximately how much? ____________________________

6. Was the market $ easy to use?  □ Yes  □ No
   If no, what challenges made using the market $ difficult (ex. transportation, market hours, etc)?
   ____________________________
   Do you have any suggestions for solutions to these challenges? ____________________________

7. What type of food did you buy with the market $?  □ Vegetables  □ Fruit  □ Meat  □ Cheese  □ Bread  □ Prepared foods
   □ Organic produce  □ Other: ____________________________

8. Did the market $ help you to: (Please check all that apply)
   □ purchase food that isn’t easily available in the neighbourhood
   □ make healthier food choices
   □ purchase food that is normally unaffordable

9. Are you interested in participating in other Community Food Programming?
   □ Cooking or Gardening Workshops  □ Community Gardening  □ Good Food Box

If you would like us to contact you regarding Stonegate CHC Community Food programs, please give us your contact information:
Name: ____________________________  Phone Number: ____________________________
Email Address: ____________________________

Thanks for your help in completing this survey. If you have any questions regarding the survey or the Stonegate Farmers’ Market $, please contact Julia Graham at 416.231.7070 ext. 229 or julia.graham@stonegatechc.org

Stonegate Community Health Centre
LETTER & AGREEMENT – Stonegate CHC clients/program participants & food bank clients
Dear ………………………………………..:

You have shown interest in becoming a participant of the 2009 Stonegate Farmers’ Market Voucher Program. As a recipient, you will have access to $10 worth of vouchers (two $5 vouchers) to be used to purchase fruits and vegetables and other goods at the Stonegate Farmers’ Market during the market season. The market runs from June 23rd – October 6th, each Tuesday from 4:00 – 7:00 pm at 194 Park Lawn Road, in the parking lot of the St. James Humber Bay Anglican Church. The vouchers are to be used in $5 increments, with no change given. Participants are able to use the vouchers at any market vendor stall, with the exception of massage, barbeque or herbal skin care stalls.

As a voucher program participant, you will be asked to sign the Stonegate Farmers’ Market Voucher Program Agreement. Once you have signed a copy of the agreement, you will be given market vouchers from staff (of the CHC or the Food bank).

If you have any questions or concerns about the program, please do not hesitate to contact Julia Graham at the health centre at 416.231.7070 ext. 229 or julia.graham@stonegatechc.org.

VOUCHER AGREEMENT
As a participant in the Stonegate Farmers’ Market Voucher Program, please read and sign the market voucher agreement below. Once CHC/Food bank staff have received your signed agreement, vouchers will be given out.

· Vouchers are valid between June 23rd to October 6th, 2009 at the Stonegate Farmers’ Market. The market runs each Tuesday, 4:00 – 7:00 pm, at 194 Park Lawn Road, in the parking lot of St. James’ Humber Bay Anglican Church.
· Vouchers may only be used at Stonegate Farmers’ Market produce and value-added vendor stalls (vouchers do not include access to the following market vendors: massage, barbeque or herbal skin care products).
· Voucher participants will not be given change from market vendors from their $5 vouchers. Please try to purchase as close to $5 in produce/product as possible because of this.
· If you decide you no longer want to use your vouchers, please contact Julia Graham at the health centre at 416.231.7070 ext. 229 or julia.graham@stonegatechc.org
· Lost or stolen vouchers will not be reimbursed.

Stonegate Farmers’ Market Voucher Participant Agreement:

I, ________________________________________, agree to abide by the above guidelines.

(print name) ________________________________________

(signature)  ____________________________  (date)

Completed by staff:
Voucher #: __________ &_________     Initial of Staff: ___________________

Stonegate Community Health Centre
Appendix 8.1
Food Procurement Guidelines

West End Urban Health Alliance (WEUHA)
Nutrition Affiliate
Healthy Eating Guidelines for Organizations¹
June 2010

¹ Guidelines adapted from Toronto Public Health Policy. It is recommended that the Guidelines be reviewed on a biannual basis (as per BHO requirements and individual organization timelines).
Appendix 8.1

Food Procurement Guidelines

BACKGROUND

[Your organization], as part of our commitment to the protection and promotion of health, has established Healthy Eating Guidelines for use at all of our community sites where our services are offered. This Healthy Eating Guidelines for Foods and Beverages Served at Programs, Events, Meetings and Functions is adapted from the Toronto Public Health Policy of the same name and reflects the Eating Well with Canada’s Food Guide (2007) and a commitment to healthy eating at [your organization].

GOAL

[Your organization] shows a commitment to the health and well-being of its staff and clients by incorporating the guiding principles into practice in the following ways:
- Supporting healthy eating at meetings, programs, workshops, functions and fundraising events;
- Healthy choices in the vending machines; and
- Whenever/wherever food is sold or offered to our staff and clients.

Balancing these principles will help to ensure our staff and clients are provided with an environment supportive of healthy eating.

PRINCIPLES

[Your organization] is committed to the following six principles which we see as fundamental to healthy eating guidelines:

1. **Promote healthy eating.** Select options that incorporate the key nutrition elements outlined in *Eating Well with Canada’s Food Guide*. Vegetables and fruit, whole grain choices, low-fat milk and alternatives, leaner meat and alternatives and foods lower in saturated and trans fat provide the basis for healthy eating. The Food Guide recommends Canadians limit foods and beverages high in calories, fat, sugar or salt, such as: cakes and pastries, chocolate and candies, cookies and granola bars, doughnuts and muffins, ice cream and frozen desserts, French fries, potato chips, nachos and other salty snacks, alcohol, fruit flavoured drinks, soft drinks, sports and energy drinks, and sweetened hot or cold drinks. Canadians are encouraged to satisfy their thirst with water.

2. **Practice safe food handling.** Meet the standards for safe food preparation and service*. The World Health Organization (1999) states that food borne illness affects 10% of the population in industrialized countries and possibly more in developing countries. Leaving food at room temperature, cross contamination of foods, and lack of proper hand washing are common causes of food borne illness. It is important to adhere to safe food handling practices and to purchase refreshments from acceptable vendors. (*At least one certified food handler working in a supervisory capacity in each area of the premises where food is prepared, processed, served, packaged or stored, in accordance with City of Toronto Bylaw 678-2006 June, 2006)*
Appendix 8.1

Food Procurement Guidelines

3. Recognize cultural diversity in our community. Select refreshment options that are culturally acceptable for those attending the event. [Your organization] is committed to ensuring access and equity throughout our organization and to the communities that we serve. The inclusion of culturally diverse foods demonstrates that the richness of cultural differences within our community is valued and respected.

4. Be environmentally responsible. Minimize waste from food, food packaging and disposable dishes, and recycle whenever possible. We can make a significant contribution to the environment by reducing consumption, recycling, reducing energy, and emitting less air and water pollution and by using less non-renewable resources.

5. Promote Ontario products. Choose Ontario products, whenever possible. This supports Ontario’s food and agriculture industries and local businesses. Our organization supports consumption of local products to decrease our dependency on foreign sources of food and for the environmental benefits of reducing fossil fuel emissions during transportation. (See Foodland Ontario’s “Ontario Fresh Fruits and Vegetables Availability Guide” www.foodland.gov.on.ca)

6. Be fiscally accountable. The money spent on refreshments should attempt to meet as many of the principles at the lowest cost (e.g. if there is not enough money to have a variety of choices (i.e. muffins and fruit), offer the healthier option only (i.e. fruit).

POLICY STATEMENT

[Your organization] is committed to supporting healthy eating at all programs, events, meetings and functions. This includes training sessions, educational workshops and community events. We will use the six principles to guide decision-making for the selection of foods and beverages served at programs, events, meetings and functions. Exercising good judgment in balancing these principles will help ensure that food and beverages served at programs, events, meetings and functions supports healthy eating. It is essential for [your organization] to be a role model and to ensure that both our messages and actions demonstrate a commitment to healthy eating.

OTHER CONSIDERATIONS

When making our final food service provider selection, the following factors will be considered:

☐ Choose a reputable company (i.e. good business practices and adhere to safe food handling regulations)
☐ Check if the provider received a “pass” during their last food safety inspection by a Toronto Public Health Inspector
☐ At least one staff has a safe food handler’s certificate (cafe operator/caterer)
☐ Check if the provider is able and willing to offer foods that meet the Healthy Eating Guidelines (e.g. similar price for healthy vs. less healthy foods)
☐ Check if the provider is able and willing to offer Ontario products

PLANNING SUGGESTIONS

Please see the attached list of food and beverage ideas and sample menus.
Appendix 8.1
Food Procurement Guidelines

**BREAKFAST**

<table>
<thead>
<tr>
<th>Vegetables and Fruit</th>
<th>Beverages</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Choose at least 1 and make it Ontario grown, if possible)</td>
<td>Water</td>
</tr>
<tr>
<td>Fresh vegetable or fruit (whole or sliced)</td>
<td>100% vegetable or fruit juice</td>
</tr>
<tr>
<td>Fruit salad</td>
<td>2%, 1%, skim milk, or fortified beverages</td>
</tr>
<tr>
<td>Fruit or vegetable tray</td>
<td>(e.g. soy beverage)</td>
</tr>
<tr>
<td>Fruit cups (packed in juice)</td>
<td>Decaffeinated beverages (e.g. herbal tea)</td>
</tr>
</tbody>
</table>

**Breakfast Items**

- Whole grain breads, toast, bagels, pitas
- Hot or cold whole grain cereal
- Trans-fat free, lower-fat baked goods: muffins, cereal/ granola bars
- Lower-fat cheeses (20% M.F. or less)
- Lower-fat yogurt (2% M.F. or less)
- Poached or boiled eggs, Inam or baked beans

**Dips and Spreads**

- Spreads (e.g. light cream cheese, jam, peanut butter, non-hydrogenated margarine)
- Lower fat dips (e.g. plain yogurt, lower fat fruit yogurt, hummus, light sour cream)

**Sample Breakfast**

- Bowl of washed apples
- 100% fruit juice
- Whole grain bagels
- Lower-fat cream cheese
- Coffee/tea and 2% milk

---

**SNACKS**

<table>
<thead>
<tr>
<th>Vegetables and Fruit</th>
<th>Snack Items</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Choose at least 1 and make it Ontario grown, if possible)</td>
<td>Whole grain crackers, plain popcorn</td>
</tr>
<tr>
<td>Fresh vegetable or fruit (whole or sliced)</td>
<td>Breads, pitas, bagels, flat breads</td>
</tr>
<tr>
<td>Fruit salad</td>
<td>Lower-fat cheese tray (20% M.F. or less)</td>
</tr>
<tr>
<td>Fruit or vegetable tray</td>
<td>Lower-fat yogurt (2% M.F. or less)</td>
</tr>
<tr>
<td>Fruit cups (packed in juice)</td>
<td>Trail mix, mixed nuts or pretzels</td>
</tr>
<tr>
<td>Dried fruit (e.g. apricots, raisins)</td>
<td>Trans-fat free, lower-fat baked goods: muffins, cereal/ granola bars, oatmeal cookies</td>
</tr>
</tbody>
</table>

**Beverages**

- Water |
- 100% vegetable or fruit juice |
- 2%, 1%, skim milk, or fortified beverages | (e.g. soy beverage) |
- Decaffeinated beverages (e.g. herbal tea) |
- Consider milk for coffee and tea |

**Sample Snack**

- Mini carrots
- Whole grain pitas
- Hummus, dip
- Jugs of chilled tap water

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WEUHA Nutrition Affiliate
Healthy Eating Guidelines
June 2010

West End Urban Health Alliance (WEUHA)
Appendix 8.1

Food Procurement Guidelines

WEUHA Nutrition Affiliate
Healthy Eating Guidelines
June 2010

LUNCH

Salads & Vegetables
- Dark green salads, such as Romane lettuce or spinach (Ontario grown if possible)
- Vegetable salads, such as tomato & cucumber or green bean salad
- Vegetable tray
- Lower-fat salad dressings or salad dressings served on the side
- Lower fat dips (e.g. hummus, plain yogurt, bean dip or light sour cream)

Sandwiches
- Whole grain breads, bagels, pita, tortillas, rolls or roti
- Lower-fat sandwich fillings such as lean roast beef, turkey, chicken, ham, salmon tuna, or lower-fat cheese (20% M.F. or less)
- Vegetarian fillings e.g. tofu, chickpeas, eggs, grilled or fresh vegetables
- Ask for sandwiches made with lower-fat mayonnaise, little or no butter or margarine, or order these served on the side. Offer mustard, chutney, relish, light cream cheese or hummus as alternatives

Main Dishes
- Meatless dishes such as pasta with tomato sauce, vegetarian lasagne, stir-fried vegetables, rice casserole
- Pasta, couscous, bean or lentil salads
- Pizza with vegetable toppings and lower fat meat toppings (such as chicken, ham)
- Meat, fish or poultry dishes that are broiled, roasted or steamed instead of fried
- Tomato based instead of creamy sauces
- Ask for whole wheat pasta, brown rice, baked potatoes or wedges instead of white pasta, white rice or French fries

Beverages
- Water
- 100% vegetable or fruit juice
- 2%, 1%, skim milk, or fortified beverages (e.g. soy beverage)
- Decaffeinated beverages (e.g. herbal tea)
- Consider milk for coffee and tea

Desserts
- Fresh fruit, fruit salads or kebabs (Ontario grown if possible) with lower fat yogurt dip
- Fruit cups (packed in juice)
- Lower-fat yogurt (2% M.F. or less)
- Lower-fat oatmeal cookies

Sample Lunch
- Assorted sandwich tray
- whole grain breads
- turkey, lower-fat cheese
- fresh and grilled vegetables
- mustard and lower-fat mayonnaise on the side
- Mixed green salad with raspberry vinaigrette on the side
- Fruit platter
- Jugs of chilled tap water
# Appendix 8.1

## Food Procurement Guidelines

### WEUHA Nutrition Affiliate

**Healthy Eating Guidelines**

*June 2010*

### BARBECUE

**Salads & Vegetables**
- Dark green salads, such as Romaine lettuce or spinach (Ontario grown if possible)
- Vegetable salads, such as tomato & cucumber, potato salad or coleslaw in non-creamy dressings
- Pasta, rice or bean salad in non-creamy dressings. Ask for whole grain pasta or rice
- Vegetable tray
- Lower-fat salad dressings or salad dressings served on the side
- Lower fat dips (e.g. hummus, plain yogurt, bean dip or light sour cream)

**Beverages**
- Water
- 100% vegetable or fruit juice
- 2%, 1%, skim milk, or fortified beverages (e.g. soy beverage)

**Grilled Items**
- Non-breaded poultry burgers (e.g. grilled chicken breast)
- Vegetarian burgers or veggie dogs
- Lean or extra lean beef burgers
- Kebabs – vegetables, lean meats or poultry
- Grilled vegetables (e.g. corn on the cob, eggplant, peppers)
- Grilled fruit (e.g. pineapple, peaches)
- Whole grain buns
- Vegetable toppings such as sliced tomatoes, cucumber, Romaine lettuce, onions
- Lower-fat mayonnaise, mustard, salsa, relish, chutney, lower-fat cheese slices

**Desserts**
- Fresh fruit, fruit salads or kebabs (Ontario grown if possible) with lower fat yogurt dip
- Fruit cups (packed in juice)
- Lower-fat yogurt (2% M.F. or less)
- Lower-fat oatmeal cookies

### Sample Barbecue

- Grilled chicken breast, lean beef and veggie burgers with assorted vegetable toppings and lower-fat condiments
- Vegetable tray with lower-fat sour cream dip
- Watermelon slices
- Water
- 100% juice

### FUNDRAISING

#### Healthier Food Items
- Fruits (e.g. apples, citrus fruit)
- Fruit or vegetable baskets
- Dried fruit mixes
- Plain popcorn
- Peanuts or nut mixes
- Sunflower or pumpkin seeds
- Cheese baskets

#### Other Items
- Flowers
- Raffles and silent auctions
- "Garage" or rummage sales
- Fabric lunch bags or tote bags
- Greeting cards
- Cookbooks, novels, magazine subscriptions
- Second hand books sales
- T-shirts
- Car washes
- Bun-athons
- 2 or 5 km walks or runs
Appendix 8.2
Grub it up Flyer

Come eat with us and discuss how to grow food justice in the city and beyond.

Tuesday, November 23rd
Lawrence Heights Community Centre
5 Replin Road
Food and drinks will be provided but feel free to bring some to share!
What kind of a life can you afford on social assistance?

Find out if the rates add up with our interactive budgeting exercise at:

http://putfoodinthebudget.ca/

Current social assistance rates do not add up to a life of health, and dignity. Even the basics of food and shelter are out of reach.

It's time to *Put Food in the Budget* and introduce a $100/month Healthy Food Supplement for all adults on social assistance as a first step towards meeting basic needs.

But that's just the first step. There needs to be a clear and transparent process for setting social assistance rates-rates that is based on the real costs of living a healthy, dignified life in Ontario.
March 10, 2010

Honorable Deb Matthews, Minister of Health and Long-Term Care
10th Floor, Hepburn Block
80 Grosvenor Street
Toronto, ON
M7A 2C4

Dear Minister Matthews,

We are a group of Community Health Centres who strongly support the provincial campaign to create a $100 monthly Healthy Food Supplement for all adults on social assistance as a first step toward providing adequate incomes. We know that the rising costs of shelter and nutritious food make it virtually impossible for people on social assistance to lead healthy lives.

As a result, people on social assistance are forced to choose between paying rent and buying food. Many send their children to school without breakfast or lunch and rely on food banks for survival. The current economic climate has exacerbated this problem: between 2008 and 2009 the North York Harvest Food Bank saw an increase of 22.5% of people using food banks.

This issue is in line with the Ministry of Health and Long-Term Care’s mandate and as Minister we are sure you recognize that poverty is a main deterrent of good health: the poorest 20% of Canadians suffer from 100% higher rates of diabetes and heart disease and a whopping 128% more mental and behavioural disorders than the wealthiest 20%. On the other hand, a recent report found that an annual $1,000 increase in income for the poorest Canadians would lead to 10,000 fewer chronic health conditions.

We are requesting a meeting with you to discuss these issues and to ask if you would support a $100 Healthy Food Supplement to be included in the provincial budget. We would also like to complete a “Do the Math” survey with you to compare the cost of living with current social assistance rates. This survey may be completed online at http://www.thestop.dothemath.org.
Thank you for your consideration of our proposal. We look forward to hearing a positive response from you.

Bronwyn Underhill  
(On behalf of the GTA CHC Food Security Committee and Put Food in the Budget Campaign)

Health Promoter  
Fairview Community Health, Flemingdon Health Centre  
416-640-5298 ext. 202  
bunderhill@fhc-chc.com

Cc: Endorsing Community Health Centres:

4 Villages Community Health Centre  
Anne Johnston Health Station  
Black Creek Community Health Centre  
Central Toronto Community Health Centres  
Davenport-Perth Neighbourhood Centre  
Flemingdon Health Centre and Fairview Community Health  
Regent Park Community Health Centre  
Rexdale Community Health Centre  
Stonegate Community Health Centre  
Vaughn Community Health Centre  
York Community Services

Cc: Put Food in the Budget Advisory Committee:

The Stop Community Food Centre  
The Social Planning Network of Ontario
Dear Premier McGuinty,

As a member of the community, I __________________________, know that access to nutritious food is essential for good health, especially for those facing challenges of living with chronic health problems with limited resources. I am deeply concerned that the Special Diet Allowance (SDA) has been cut, when so many Ontarians with health challenges acutely need this benefit to supplement their Ontario Works or Ontario Disability Support Program benefits.

I am urging for you to maintain the SDA program by:

+ Instead of cutting it, maintain the $200 million in direct financial support
+ Ensure that everyone on Social Assistance who needs dietary support receives it
+ Ensure equality in its programs by raising the standards for all

March 29, 2010

Honourable Deb Matthews
Minister of Health and Long Term Care
10th Floor, Hepburn Block
80 Grosvenor Street
Toronto, Ontario
M7A 2C4

Re.: Maintaining the Special Diet Allowance

Dear Minister Matthews

I am writing on behalf of the Board of Directors of The Four Villages Community Health Centre to urge you to maintain the Special Diet Allowance.

As Board members, we are concerned with the impact of poverty and low income on the health of our clients. We want to add our voice to the collective appeal of Community Health Centres regarding this matter and reiterate our strong support for the provincial campaign to create a $100 monthly Healthy Food Supplement for all adults on social assistance.

Income is a key determinant of health. People with low income are poor and face food insecurity. Countless studies show that poor people have worse health. In our province, thousands of Ontarians need the Special Diet Allowance to maintain their food security and their health.

We are asking you to maintain the Special Diet Allowance and implement the recommendations of the Special Diets Expert Review Committee, the Ontario Human Rights Tribunal and Social Assistance Review Advisory Council to raise social assistance rates to meet the basic requirements of healthy living.

Sincerely

Bernice McLeod (Cipparrone)
President, Board of Directors
The Four Villages Community Health Centre
Special Diet Allowance Facts

*What is the Special Diet Allowance?*

The Special Diet Allowance program is a long-standing part of Ontario’s social assistance system. It pays the extra costs for special foods needed by people with various health conditions, such as diabetes or MS.

*Who is eligible for the Special Diet Allowance?*

The Ontario government has created a new special diet allowance application form that lists the medical conditions that require a special diet. See their website for a list of medical conditions requiring a special diet. More than 160,000 people on welfare or disability support payments also qualified for the special allowance of up to $250 a month. Applications must be signed by a doctor, nurse, dietitian or midwife.

*What is the concern?*

The program was first created in 2003 in response to those on Ontario Works’ special food needs due to their confirmed medical conditions. In 2006, the Special Diet program cost $6 million. Now it costs $200 million. They say costs have risen too much, too fast, making the program “unsustainable”. On March 25, as part of its 2010 budget, the provincial government announced that it will cancel the Special Diet Allowance Program and replace it with a new program:
- it will be a “nutritional supplement” program – not a “special diet” program
- it is intended to only help people with “severe medical needs” – not the people who need special dietary treatment to manage their conditions and prevent worse health
- not everyone who is currently on the Special Diet Allowance will be eligible for the new program – so the government will save money
- it will be run and paid for by the Ministry of Health – not the Ministry of Community and Social Services
- They point to the auditor general’s December 2009 report, which insinuated that many people who receive support – and their doctors, nurses, and dietitians – are purposely abusing the program.

*What makes this issue concerning compared to other government programs?*

In any other government program, abuse is investigated and, if confirmed, dealt with directly. Entire programs are not cancelled because of claims of abuse.

*Is there a link between poverty and poor health?*

Yes. It is well known that people living on low incomes are much more likely to have serious health problems, because of the link between poverty and poor health.

*Resources:*

http://www.incomesecurity.org/specialdiet.htm
http://www.toronto.ca/socialservices/Policy/spdiet.htm
Appendix 8.5
Selected Additional Advocacy Campaigns

Daily Bread Food Bank – Community Based Research
http://www.dailybread.ca/learning-centre/community-based-research/

Nutritious Food Basket in Action (Report to the Board of Health):
November 5th, 2010, report to the Board of Health regarding Nutritious Food Basket, 2010, with subsequent calls to action and dissemination to various government and community stakeholders.

People’s Blueprint (Voices from the Street & Daily Bread Food Bank):
http://peoplesblueprint.ca/
Over 100 recorded interviews with people living on social assistance in Ontario demonstrate the hopes, challenges and abilities of people living on social assistance in an intensely personal way.

Poverty Watch Ontario:
http://www.povertywatchontario.ca/resources/
An excellent listing of varied initiatives across Ontario in pursuit of equitable conditions for health.

The St. James Town Initiative
A Wellesley Institute initiative, compelling example of community development and engagement.
To provide feedback or add to our manual, please contact
Bronwyn Underhill: bunderhill@fhc-chc.com