![Centre for Community Learning & Development — Strong Communities Together — CCL&D Toronto]

Community Resource & Needs Assessment
(Newton Brook West)

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(Imigrant women Integration Program)

2014

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Executive summary

The purpose of this report is to provide an overview of the community needs assessment based on Community Index of Well-being survey in these areas:
Safety, Living standards, health, civic engagement, Volunteering and Community participation in Newton brook west neighborhood.

In order to effectively promote and sustain the health and well-being in Toronto, planners, policy makers and service providers need timely and relevant information on Wellbeing indexes. This report brings together new and existing evidence related to welling in Newton brook west neighborhood. Finding presented here draw from a local community –based study, with residents who are living in this neighborhood and socio demographic data. This report is intended to be useful resource for policy makers, health planners, service providers and other interested in making Toronto a healthier and more equitable place to live for all residents.

Since 1970s, the principal source region for immigrants to the city has shifted from Europe to Asia. More than half of all newcomers to Toronto between 2001 and 2006 have come from Asian countries. Between 2001 and 2006, the top source countries for permanent residents to Toronto during this period were China, India, Philippines, Pakistan and Seri lanka. Significant numbers of immigrants and refugees also com to Toronto from Africa, Middle East, Eastern Europe, and South and Central America. These demographic changes have important policy and program implications for the policy makers to consider kinds of decisions that are needed and the ways in which these decisions are implemented.(1)

Based on 2011 census of city of Toronto, Newton brook west neighborhood is a diverse community. There are 14%Russian, 8%Korean, 8% Persian, 8% Pilipino languages (around 9000 numbers of residents) and many other mother tongue languages (like Chinese, Italian, Mandarin, Spanish and Hebrew) here. Also lower proportion of children and youth aged 0-19 and higher proportion of recent immigrant.

Methodology

Study design: An Observational Study (A Cross – sectional study)

Data collection: Questionnaire (Printed and electronic)

Study site: Newton Brook West Neighborhood

Target group: All neighborhood residents (Over 18 years old)

Timeline: September-April (2013-2014)

Sample size: 95 residents
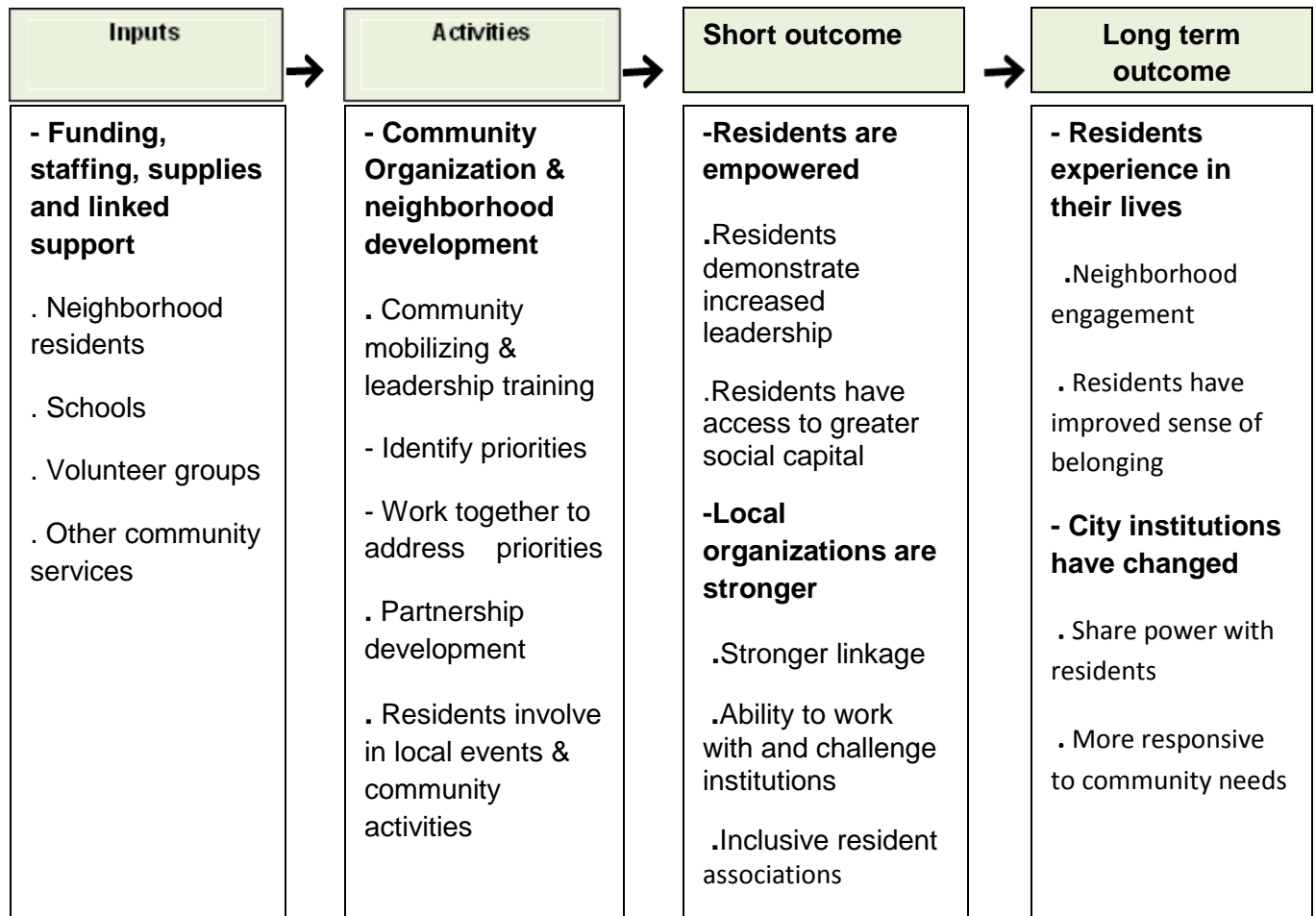
Survey findings

- For 91% respondents (95 residents), English is not their first language.
- Of those, 65% are in intermediate level of English speaking.
- Majority of respondents are newcomers.45% of them have lived in Canada for 1-3 yrs.(15% less than 1 year,18% 4-6 yrs. and 8% more than 10 yrs.)
- 64% of respondent have graduated degree or higher. And had appropriate experience in their fields in their home country
- 53% housing situation is rent and 44% own house.
- Only 17% have a full time job now.
- Only 12% thought that people get along with each other in this area.
- 73% never or rarely visit or chat with their neighbors.
- Feeling part of the community in 46% is below the average.
- 75% don't participate in any neighborhood groups or organizations.
- 49% said they are not happy.

Based on this survey`s results, Job. Sense of belonging and social network are three Main issues in the Newton brook west. And one identified issue was this question: "why people in our neighborhood have low sense of feeling part of the community and are in low level of visiting or chatting with their neighbors?

One recommendation for my community could be establishing a Neighborhood association (Leadership Neighborhood Club) for improving social network between Newton brook residents due to value the experience of new skilled immigrants and existing residents for their integration in Canadian society. There are several services works in isolated way and there are not effective coordination between them in this community (like Churches, schools, Recreational center and two parks with enough spaces for running local events and traditional ceremonies. Few community based programs are administered each year in this neighborhood and residents have to go far for attending to many events and community based activities. We can use of this services for holding our meetings with their participating in our club/association and their support for identifying many issues and running some events in this neighborhood. In these Ways residents sense that they have a place to go, improve their relationship, be more familiar with other ethnic groups, say they problems and get help.

In this manner we would have effective neighborhood meetings which could lead residential satisfaction and more community local events and volunteers .After a while we could have stronger social network and well mentioned public spaces in our neighborhood.

Recommendation for Newton brook west based on Logic Model

Inputs	→	Activities	→	Short outcome	→	Long term outcome
- Funding, staffing, supplies and linked support . Neighborhood residents . Schools . Volunteer groups . Other community services		**- Community Organization & neighborhood development** . Community mobilizing & leadership training - Identify priorities - Work together to address priorities . Partnership development . Residents involve in local events & community activities		**-Residents are empowered** .Residents demonstrate increased leadership .Residents have access to greater social capital **-Local organizations are stronger** .Stronger linkage .Ability to work with and challenge institutions .Inclusive resident associations		**- Residents experience in their lives** .Neighborhood engagement . Residents have improved sense of belonging **- City institutions have changed** . Share power with residents . More responsive to community needs

Design issues to consider
- Engagement methods - Need for independent facilitation - Location and accessibility - The number and type of engage people - Child care need - Needs for outreach activities - Formal publicity materials
Barriers
- The capacity and ability of different stakeholders to participants. - Hard to reach groups such as young people. - Elder people, minority people, socially educated people. - Level of community infrastructure - Gaps of information - Literacy and numeracy level and dominance of oral culture. - Different culture and believes

Needs Assessment

**"What gets measured gets managed"**

Peter Drucker

A needs assessment is conducted before the activity is planned. The purpose of needs assessment is to make decisions regarding priorities for the program. for better understanding, below definitions will be useful:

1- **Gap:** the space between what currently exists and what should exist.
2- **Needs:** are contributing factors
   - What needs to be resolved to help close a Gap?
   - Needs often relate to barriers.
3- **Wants:** are possible solutions.
   - A proposed means to filling the gap.
4- **Assessment:** is the evaluation of needs, barriers and resources.
5- **Needs Assessment**: is process of identifying and measuring areas for improvement in a target audience and the model to achieve improvement.

So Need Assessment is:

The community Resources and Needs assessments identify to raise awareness the available community resources, to highlight the community's strengths, to get a sense of the accessibility challenges which community residents face, and to determine the gaps and how we can provide a healthy condition for resident community.

Action plan

Assessment

Pre-Assessment
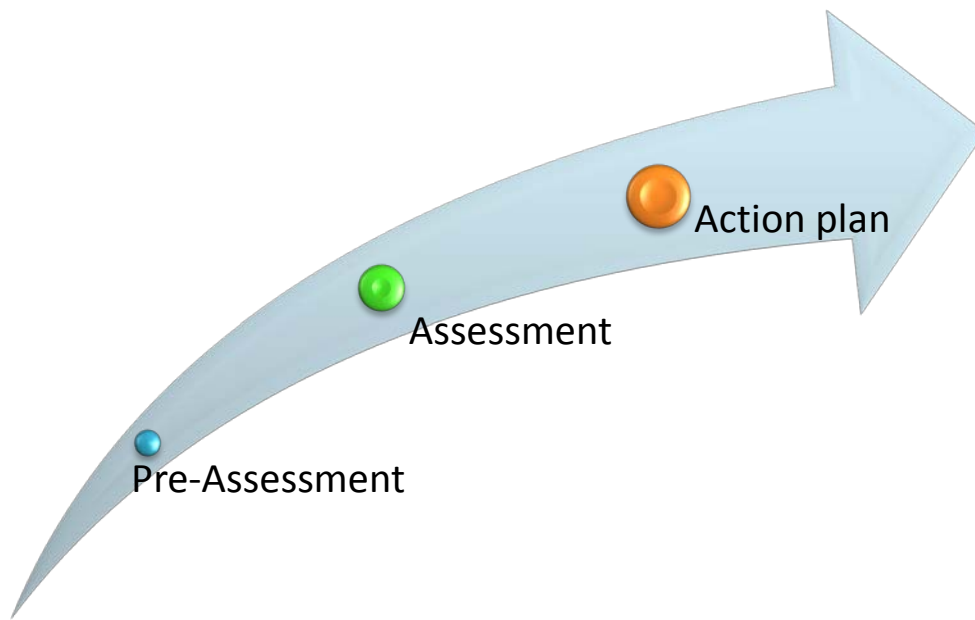
Definition of Wellbeing

"Around the world, a consensus is growing about the need for a more holistic and transparent way to measure societal progress – one that accounts for more than just economic indicators such as the Gross Domestic Product and takes into account the full range of social, health, environmental and economic concerns of citizens."

-The Honourable Roy J. Romanow-
Chair, Institute of Wellbeing Advisory Board

Over the last two decades, there has been a growing body of work that evaluates human well-being based on self-reporting by individuals and groups. Generally referred to as measures of subjective well-being (SWB), these studies attempt to measure "satisfaction" with quality of life or people's moods and emotions (Diener and Suh 1999). The intent is to measure the extent to which human needs are actually being met. Because these measures are based on the judgments of the survey respondents rather than on more easily quantifiable inputs of money and material goods, there are concerns that these "subjective" measures are not factually based and therefore less valid than "objective" measures like GDP. However, as pointed out by Costanza and others, objective measures such as life expectancy, rates of disease, and GDP are only proxies for well-being that have been identified through the subjective judgment of decision-makers; "hence the distinction between objective and subjective indicators is somewhat illusory" (Costanza, Fisher et al. 2007, 268).

A national index that will report regularly on the wellbeing of Canadians in eight areas or domains:

- ✓ Healthy populations

- ✓ Living standards

- ✓ Community vitality

- ✓ Democratic engagement

- ✓ Time use

- ✓ Arts, culture and recreation

- ✓ Education

- ✓ Environment

When it's complete, in early 2010, the Canadian Index of Wellbeing will be a national, composite index that will report on the wellbeing of Canadians through looking at these eight areas of life, or domains.

These eight areas were determined through three rounds of consultations with indicator experts, researchers, academics and regular Canadians across Canada. They were chosen because, ultimately, they are the things that we most value, the things we care about, as Canadians.

In order to measure our wellbeing as a society, we need to measure what matters to us – and Canadians have told us that what matters is these eight areas of life. (2)

History of Newton brook

Newton brook was first settled in the early 1800's. This hamlet revolved around saw and grist mills that operated on the east and west branches of the Don River. The spiritual center of this hard working pioneer community was the Newton Brook Wesleyan Church which was named after Reverend Robert Newton. One of Newton brook's earliest settlers was Lieutenant Colonel William S. Durie of the Queens Own Rifles. Durie subdivided part of his Newton brook property in 1847 creating what is now known as Drewry Avenue. At first Drewry Street was given the name "Pope's Lane" because so many Roman Catholics built houses here. The "Rueter House" at 270 Drewry is the only house still standing from this early Newton brook subdivision.

When Newton brook was subdivided for large scale residential development in the 1950's most of the former village landmarks were demolished. The two notable exceptions are the Newton brook Schoolhouse, circa 1878, located at 43 Drewry Avenue and the second Newton brook General Store, circa 1907, located on the north-west corner of Yonge Street and Drewry Avenue.
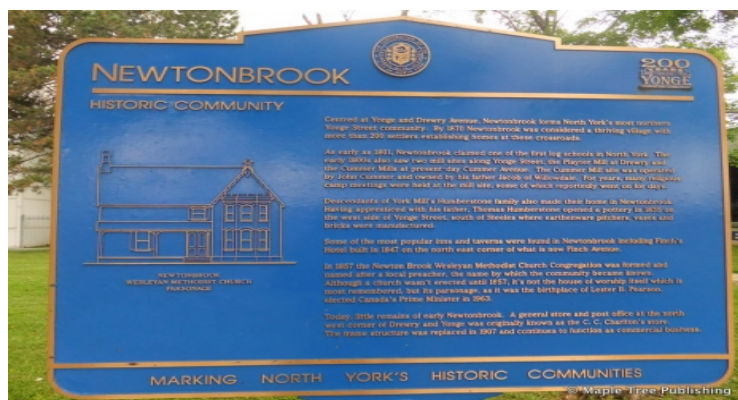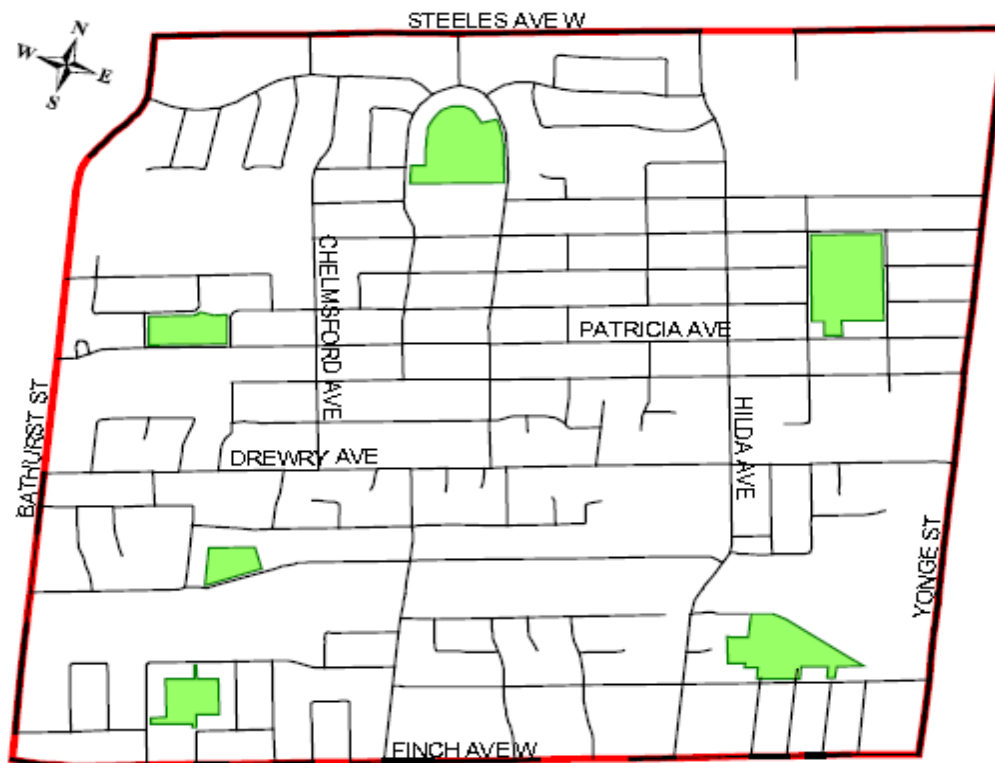
Newton Brook (west)

Newton brook is located at the north end of the City of Toronto. It is situated between the east and west branches of the Don River Valley, which serve to provide an attractive natural backdrop for this neighborhood in addition to providing residents with plenty of recreational opportunities.

Newton brook's most famous native son is the late Lester B. Pearson who became Prime Minister of Canada in 1963 and won the Nobel Peace Prize for his role in diffusing the Suez Canal crisis. The local Lester B. Pearson School is named in his honor.
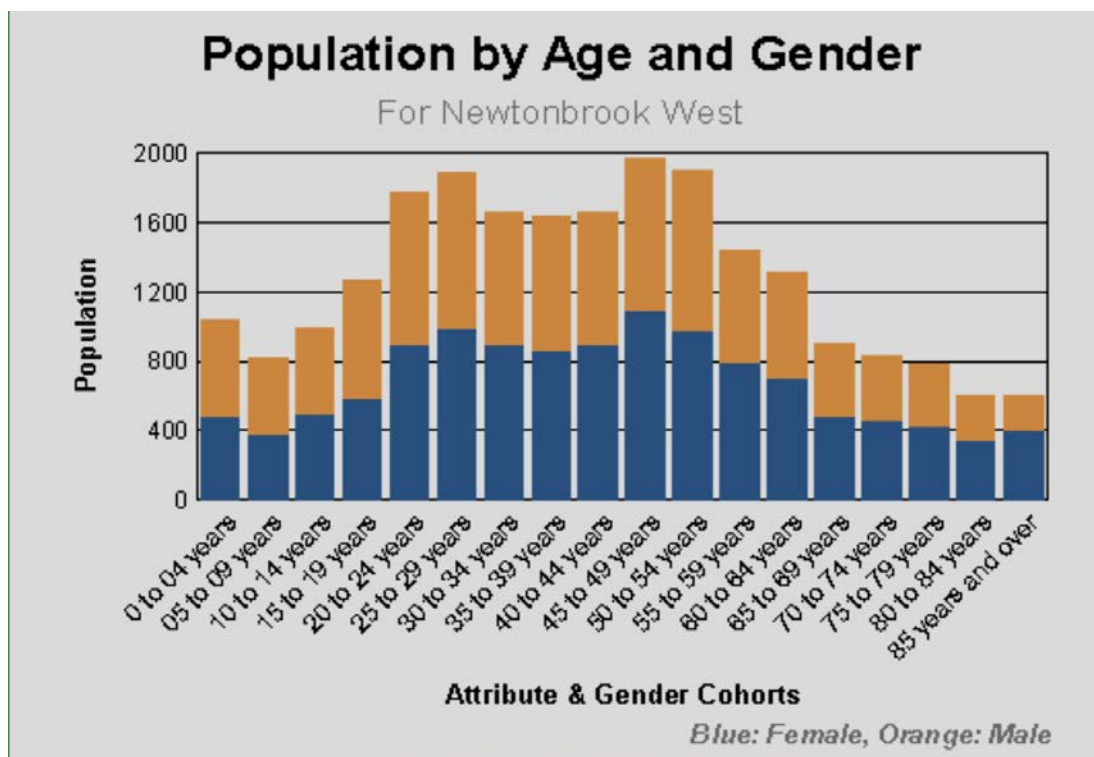
Newton brook (West):

By North: Steels Ave

By South: Finch Ave

By west: Bathurst street

By East: Yonge Street

www.neighbourhood.com

Demographic of Newton Brook based on Statistics from City of Toronto

Population by Age and Gender
For Newtonbrook West

A stacked bar chart titled "Population by Age and Gender For Newtonbrook West". The y-axis is labeled "Population" ranging from 0 to 2000. The x-axis is labeled "Attribute & Gender Cohorts" with age groups: 0 to 04 years, 05 to 09 years, 10 to 14 years, 15 to 19 years, 20 to 24 years, 25 to 29 years, 30 to 34 years, 35 to 39 years, 40 to 44 years, 45 to 49 years, 50 to 54 years, 55 to 59 years, 60 to 64 years, 65 to 69 years, 70 to 74 years, 75 to 79 years, 80 to 84 years, 85 years and over.

Blue: Female, Orange: Male

How does Newtonbrook West differ from the equivalent City of Toronto Age Groups?

Children 0-14	-19.4%
Youth 15-24	3.5%
Working Age 25-64	1.6%
Seniors 65+	11.2%

Top 10 Non Official Mother Tongue Language In neighborhood

	# of People	
Russian	3,260	14.3%
Korean	2,015	8.8%
Persian (Farsi)	1,820	8.0%
Tagalog (Pilipino, Filipino)	1,815	7.9%
Chinese, n.o.s.	680	3.0%
Italian	645	2.8%
Mandarin	495	2.2%
Cantonese	415	1.8%
Spanish	385	1.7%
Hebrew	305	1.3%

This data is based on 2011 census of city of Toronto website about various neighborhoods in Toronto. Newton Brook West (36) is located in North York .Based on census the top four non official languages in this neighborhood are Russian(14.3%,#3260 of people),Korean(8.8%,# 2015 of people), Persian(8.0%,# 1820 of people) and Tangelo or Pilipino(7.9% # 1815 of people) that shows high rate in immigration level. In compare of the equivalent city of Toronto there is rate of children 0-14(-19.4%), rate of Youth 15-24 (3.5%), Working age 25-64(1.6%), Seniors >65 (11.2%).Low rate level of children leads to more decease in rates of youth and working age in following years. On the other hand, the rate of seniors will be increased. So, we need correct decision making for balancing between these rates and preparing more facilities for seniors. For example we can focus on promoting the rate of immigration level (especially families with children) in this neighborhood.
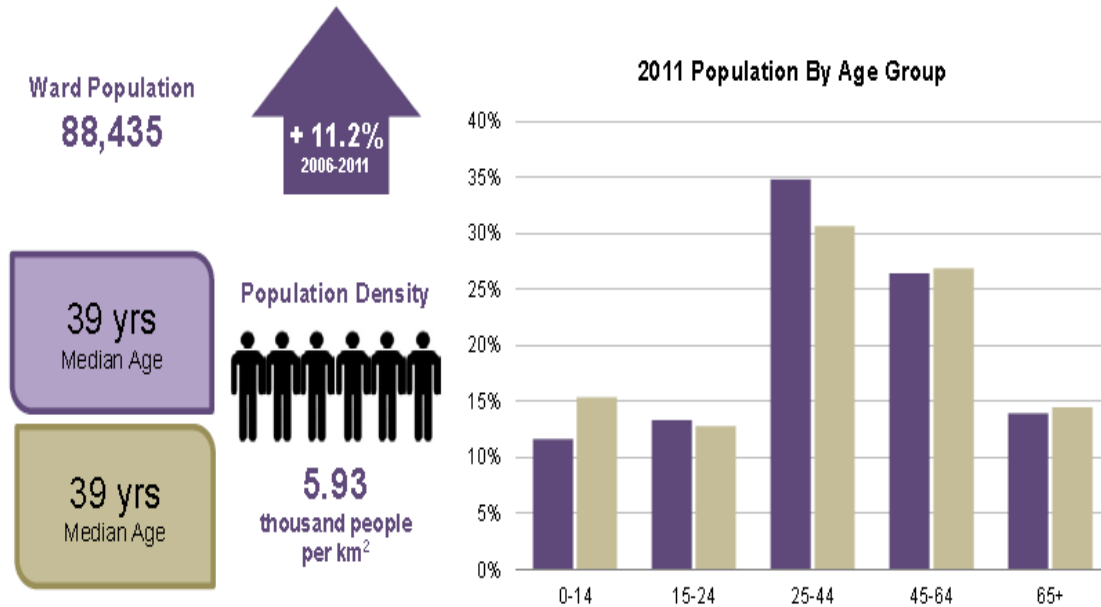
Ward Willodale 23: (Newton brook west is a part of Ward Willodale 23)

By North: Steels Ave &finch Ave - **By South**: High way 401- **By EAST:** Yonge Street till Finch Ave & Bay view Ave till High way 401- **By west**: Bathurst Street
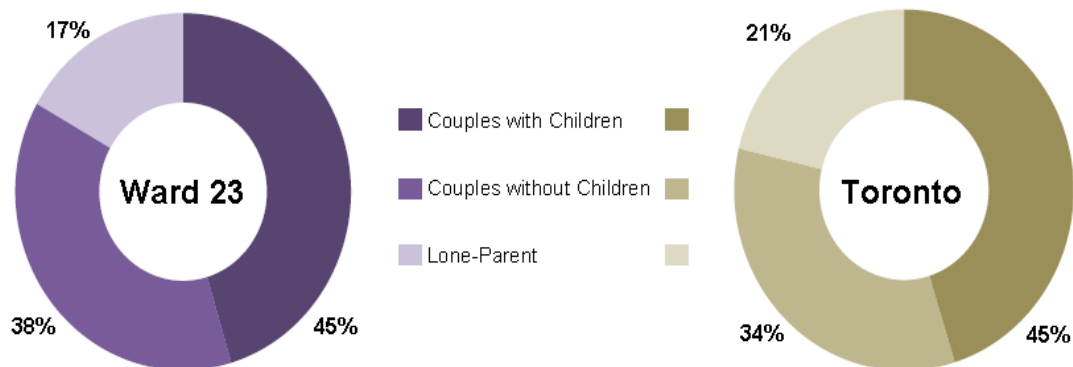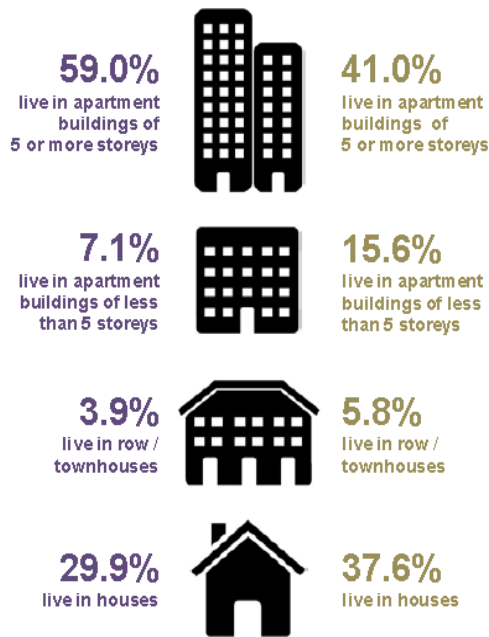
HIGHLIGHTS ■ Ward ■ Toronto

Population

Ward Population
88,435

+ 11.2%
2006-2011

39 yrs
Median Age

39 yrs
Median Age

Population Density

5.93
thousand people
per km^2

2011 Population By Age Group

Families by Type

Ward 23

17%
38%
45%

Couples with Children
Couples without Children
Lone-Parent

Toronto

21%
34%
45%

Households

59.0% live in apartment buildings of 5 or more storeys

41.0% live in apartment buildings of 5 or more storeys

7.1% live in apartment buildings of less than 5 storeys

15.6% live in apartment buildings of less than 5 storeys

3.9% live in row / townhouses

5.8% live in row / townhouses

29.9% live in houses

37.6% live in houses

Key Facts

22.6% children 25 years of age or more living at home

17.9% children 25 years of age or more living at home

5.7% with no knowledge of english or french

5.3% with no knowledge of english or french

2.35 persons per household

2.46 persons per household

31.3% one person households

31.6% one person households

http://app.toronto.ca/wards/jsp/wards.jsp

-All data are based on 2011 survey were prepared by the Social Policy Analysis and Research unit in the City's Social Development & the Administration Division with assistance from Toronto Public Health.

The ward population is 88,435 people that have increased 11.2% from 2006 to 2011. According to housing opportunities, 59% people in ward 23 live in apartment building of 5 or more stories and 29.9% are living in house. in this ward, the top mother language is English (33.7%,# 29,790 people).Other four top languages are Persian(9.7%,8845 people), Korean (9.2%,#8150), Chinese (6.8%,#6.040) and Mandarin(5.8%,#5.125) .but in city of Toronto these rates are English (50.9%), Chinese(3.3%),Cantonese(3.2%) ,Italian(2.8%) and Spanish(2.7%) in compare. As a result, the ethnic group proportions are different from the average in the city and different kinds of immigrant's rates are higher. So it seems to need special notice to both different and common ethnic group`s values for improving the community. The important point that I figured out is separating this groups from each other in this ward. So, each one of these groups has especial community centres , plazas and celebration without sharing clearly with each other.

Ward 23 varies from the City of Toronto as a whole by having a:

• Lower proportion of children and youth aged 0 to 19
• Higher proportion of younger adults aged 20 to 39
• Lower proportion of people with less than a high school education
• Higher proportion of recent immigrants
• Lower proportion of teenagers giving birth
• Higher rate of injuries to seniors resulting in emergency department visits
• Lower rate of respiratory disease hospitalization and mortality
• Lower rate for cancer mortality
• Lower rate of cardiovascular disease hospitalization and mortality
• Lower rate of tuberculosis
• Lower rate of sexually transmitted infections

Variations in positive and negative health outcomes are strongly influenced by differences in social determinants including income, immigration status, education, employment and others.

-Toronto Public Health Service Highlights

Services are provided to protect against health hazards, prevent disease, and promote good health in Ward 23 at locations that include:
• 1 TPH office site
• 1 sexual health clinic
• 1 dental clinic
• 1 needle exchange site
• 215 food premises
• 23 child care centres
• 2 funeral homes
• 128 personal services settings
• 102 pools, spas and splash pads
• 24 schools
• 4 student nutrition sites

Services are also provided through various community organizations. In addition to these "place-based" services, TPH provides other services to individuals, families and other group

1-Reproductive and Child Health

Compared to Toronto, Ward 23 has:
• **A similar singleton low birth weight rate.** Babies born with a low birth weight (less than 2,500 grams) are at higher risk for many short-term and long-term poor health outcomes.
• **A significantly* lower rate of teenagers giving birth.** Babies born to teenage mothers are more likely to be born prematurely and/or with low birth weight.

• A similar percent of kindergarten students who are vulnerable in terms of readiness to learn. Being vulnerable in terms of readiness to learn may be associated with less success in school and higher risk for poor health outcomes in years to come.
• A similar percent of students who have dental cavities. Cavities early in life can be an indicator of dental problems later on.

2-Injury
Compared to Toronto, Ward 23 has:
• A similar rate of Emergency Department visits for injuries among children and youth. Common injuries for which children and youth visit the ED are from hitting or being hit by an object or person and from falling.
• A significantly* higher rate of ED visits for injuries among seniors. Common injuries for which seniors visit the ED are from falling.

3-Hospitalization and Mortality
Compared to Toronto, Ward 23 has:
• A significantly lower rate of hospitalization and mortality for respiratory disease. Common respiratory diseases include asthma, chronic obstructive pulmonary disease and lung conditions excluding cancer. Respiratory disease can be caused by smoking and environmental toxins.
• A similar rate of hospitalization and significantly* lower rate of mortality for cancer. Cancer can be caused by smoking, overweight/obesity, poor diet, physical inactivity, alcohol, unprotected sun exposure, radiation, certain chemicals, and environmental toxins.
• A significantly* lower rate of hospitalization and mortality for cardiovascular disease. Cardiovascular disease can be caused by overweight/obesity, poor diet, physical inactivity, smoking, diabetes, high blood pressure and stress.

4-Infectious Disease
Compared to Toronto, Ward 23 has:
• A significantly* lower rate of tuberculosis. TB continues to disproportionately affect Toronto's foreign-born population, reflecting high rates of TB in their countries of origin.
• A similar rate of influenza.
• A similar rate of enteric diseases.
• A significantly lower rate of sexually transmitted infections. This group of diseases is the most frequently reported among infectious diseases in Toronto.

Groceries

Grocery stores (small and large): There are several large chain grocery stores serving my area. These include: No Frills, Food basic, Lablaws and Metro.
Famers Markets: there is one farmer market in MelLast man square.
Shops:

Clothing stores: In Center point mall include: Target, Bay, and several small clothing stores

Thrift stores: Value Village on Bathurst Street.

Shopping Centres: The main mall in Ward 23 is the Center point mall, which holds the following stores: Target, The bay, Canadian tire, No frills and several other small shops. There are several shopping centers like Dollarama, Loblaws, Shoppers Drug Mart and Sears. As well, there is a plaza on Yonge Street with Iranian stores called Newton Brook plaza

Other retail stores or areas: there are some small private stores especially in Yong street (TimHortone, book stores, Hair style stores, food stores, Fixing and sewing store, printing &copy………….)

Recreational canters:

A few of the recreational centers in and around Newton Brook are as follows: Edit vale center , Art science center, Goulding center, Northview heigh ss center, Antibes center, Cummer Park Fitness Centre, Esther Shiner stadium. There are also some art and civic centers, several parks, and some biking and walking trails along with local pools that people go for art and recreation.

Other places:

Community Centers: Prosserman Jewish community centre, Edithval community centre, and Korean community Centre .

Radio/TV Station: There does not seem to be a radio or television station in Newton Brook, to my knowledge. The local newspapers are Metro and 24 Life. Some local weekly magazines are Hamshahri and Hooshmand, both written and printed in Persian languages.

Non-profit organizations: There are 9 service locations in the Willowdale and surrounding area. These locations are operated and funded by Toronto Public Health (TPH). These include TPH office sites, sexual health and dental clinics, a needle exchange site and preschool speech and language services. Also there are some others services such as The Iranian Community Association of Ontario and IWOO (Iranian Women Organization of Ontario).

Clubs: YMCA

Libraries: Central North York library and Centennial library. Also there are sexual health and dental clinics, a needle exchange site and several Heath centres in this ward. There are several company branches of Rogers, Bell, Wind, Fido for TV, phone, cellphone, and internet cable services. There are many bank branches like RBC, TD, and Scotia bank. As well, there are 24 different kinds of schools in this area .Newton

Brook has several welcome centres (like VPI, Yong centre) that offer many services. These centres hold and run several workshops, housing information nights, help finding local services, and job searching for residents.
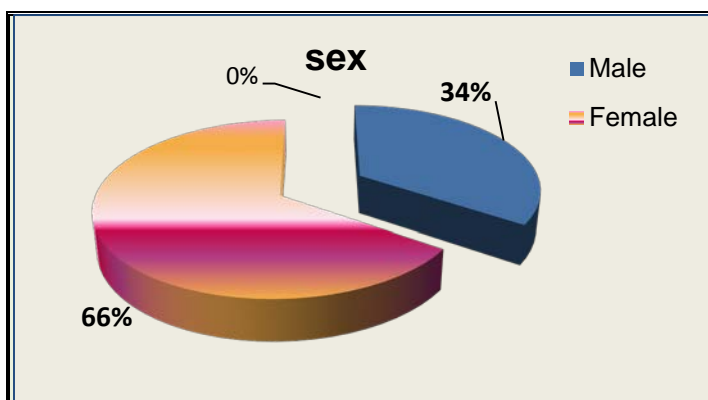
Survey Findings

1-Demographics

1.1-age
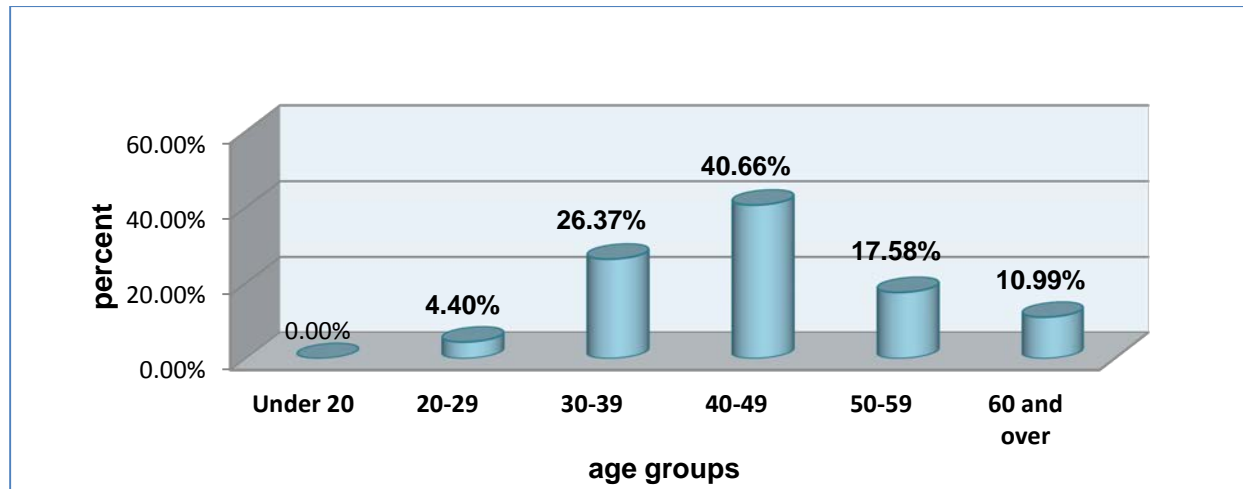
The respondent's population in the survey:

- 88% of respondents are between 20-59 yrs. And in age to work
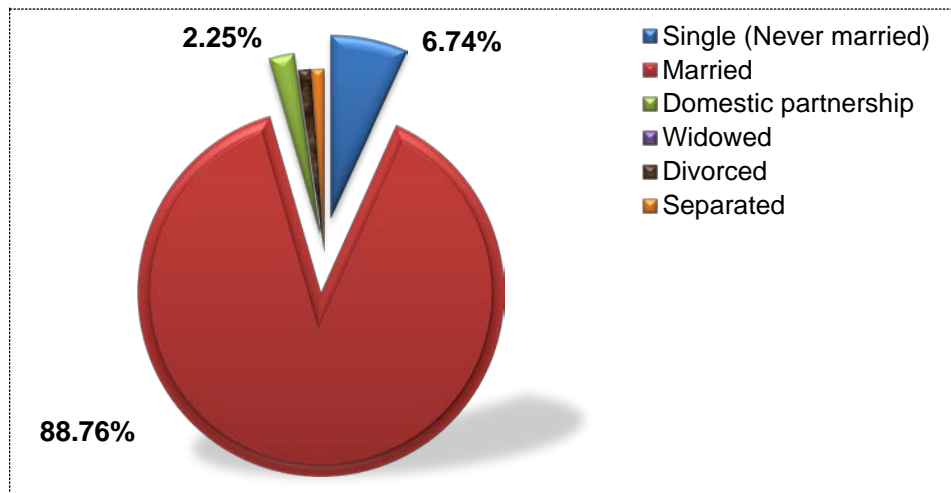
- 10.99% of those are more than 60 yrs.

1.2- Sex

The gender graph shows that the majority of residents who respond the survey are:

- Female, 66%
- Male, 34%

1.3- Marital status

This graph demonstrates that the majority of respondents are married with 88.76%. The level of marital status of this graph in order is:

- Married, 88.76%
- Single, 6.74%
- Domestic partnership, 2.25%

1.4-highest level of completed schooling
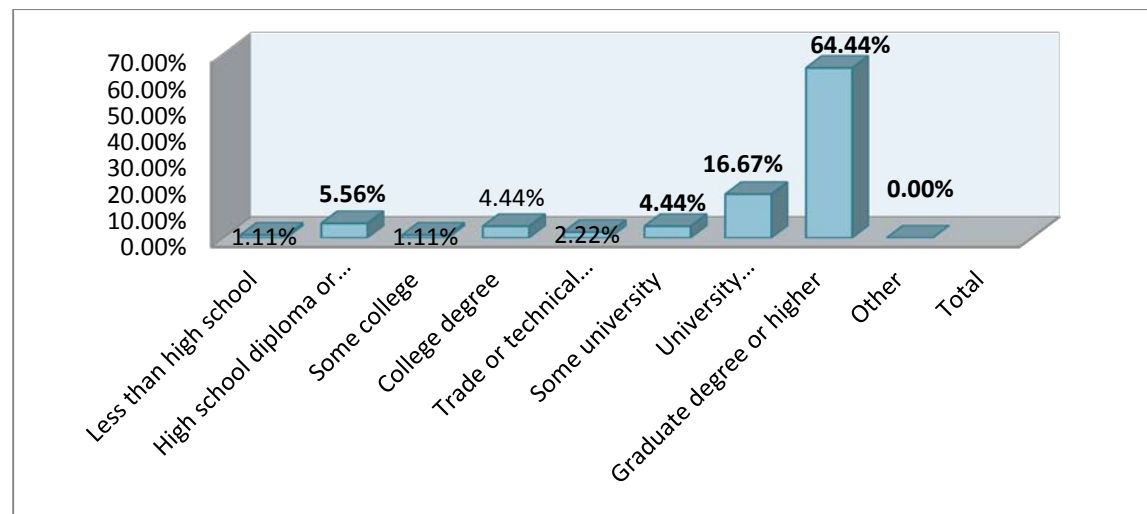
The level of education graph shows that the majority of respondents have some graduate degree or higher 64.44 and 16.67 universities under graduate degree.

1.5 having Canadian education and/or training experience

Yes	No	total
36	55	91
39.56%	60.44%	100%

This table shows that 60.44% of respondents don't have Canadian education (majority of them are international professional newcomers)

1.6- English as a first language.

Yes	No	total
8	83	91
8.79%	91.21%	100

Based on this table, for 91% of respondents English is not the first language.

1.7-Level of speaking English
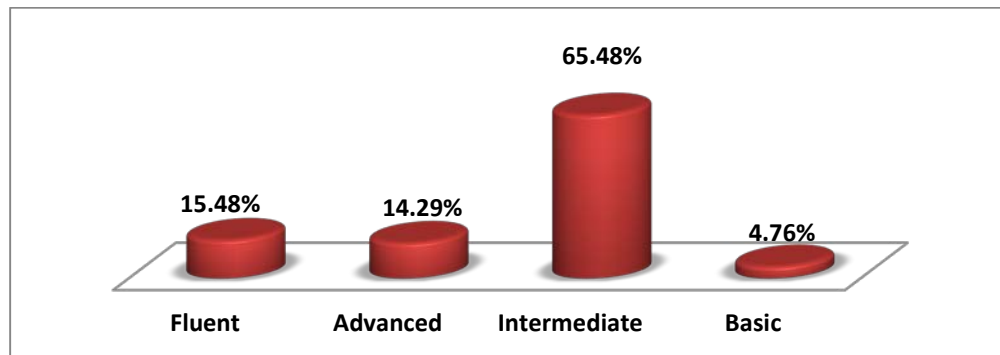
65% of those who do not speak in English as a first language are in intermediate level of English speaking.

1.8- current immigration/resident status

Visitor	Permanent resident	Refugee	Canadian citizen	Visa student
2.20%	79.12%	1.10%	17.58%	0.00%

Majority of respondents are permanent residents (79.12%).Only 17.58% are Canadian citizens.
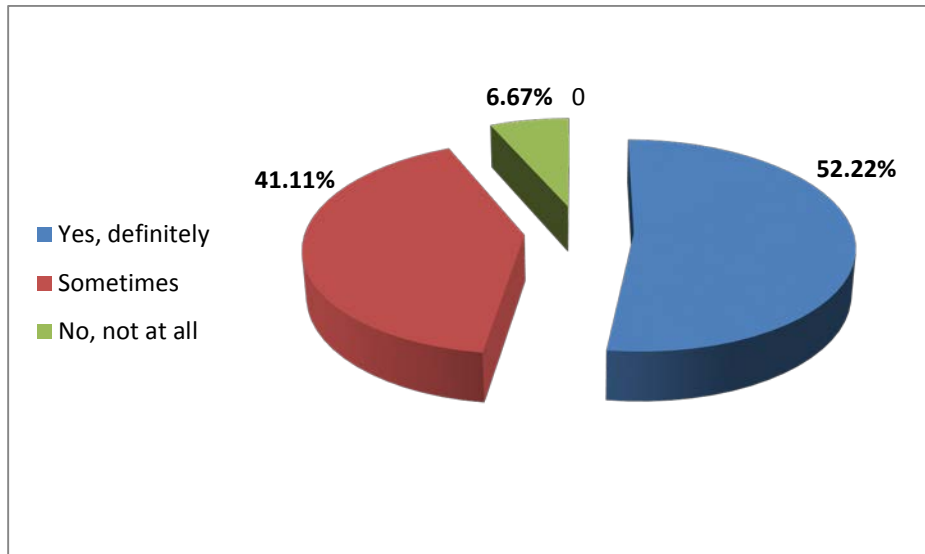
1.9- Living in Canada
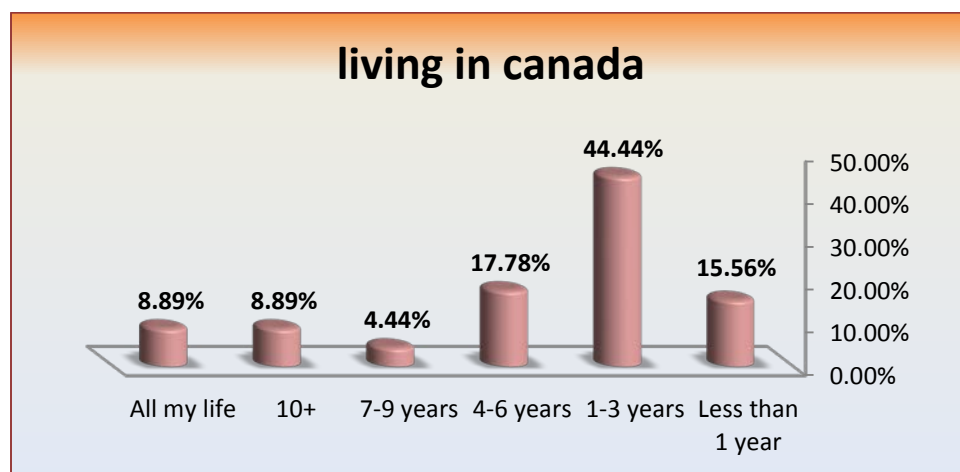
Majority of respondents are newcomers.45% of them have lived in Canada for 1-3 yrs.(15% less than 1 year,18% 4-6 yrs. and 8% more than 10 yrs.)

1.10- most closely self-identify
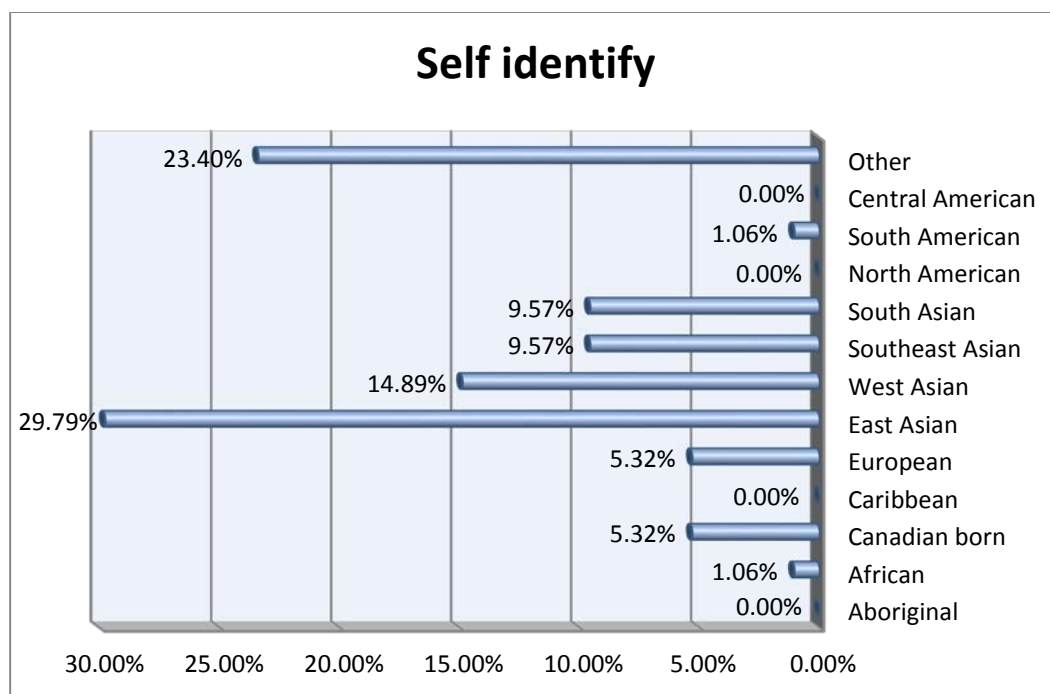
2- Community strength

2.1- getting help from friends, family and neighbors when needed

-%52% of respondents can get help from friends, family and neighbors.

2.2- willing to help the neighbors.

Strongly agree	Somewhat agree	Neither agree Neither disagree	Somewhat disagree	Strongly disagree
16	52	10	10	2
17.78%	57.78%	11.11%	11.11%	2.28%

2.3- People around here help their neighbors, even if they are from different backgrounds

Strongly agree	Somewhat agree	Neither agree Neither disagree	Somewhat disagree	Strongly disagree
13	49	16	11	2
14.29%	53.85%	17.58%	12.09%	2.20%

2.4-people in this neighborhood generally don't get along with each other

Strongly agree	Somewhat agree	Neither agree Neither disagree	Somewhat disagree	Strongly disagree
7	32	19	19	12
7.78%	35.96%	21.25%	21.25%	13.48%

-75%agree that there is willing to help in their neighborhood and 68% agree that their neighbors will help them. On the other hand, near 44%of them agree that people in their neighborhood generally don't get along with each other.

2.5-In an average day, with how many people do you speak?

0	1-3	4-6	7-10	11+
3	28	25	21	14
3.30%	30.77%	27.47%	23.08%	15.38%

2.6-In an average week, how often do you and your neighbours visit or stop to chat with each other?

Often	Rarely	Never	Total
18	61	12	91
19.78%	67.03%	13.19%	100%

2.7-How likely is it that your neighbours would intervene if they saw a child being bullied?

Very likely	Somewhat likely	Neither likely nor unlikely	Somewhat unlikely	Strongly unlikely
27	27	21	8	4
31.03%	31.03%	24.14%	9.20%	4.60%

-67% of respondents rarely and 12% never visit their neighbors or chat with them.

3-Safety

3.1-safe or unsafe feeling in the following situations

	Very safe	Safe	Neither safe nor unsafe	Unsafe	Very unsafe
At home by yourself during the day	**49 (55.06%)**	40 (44.94)	0	0	0
At home by yourself after dark	**43 (48.31%)**	36 (40.45%)	9 (10.11%)	0	1 (1.12%)
Walking in your local area alone during the day	**43 (48.31%)**	42 (47.19%)	4 (4.49%)	0	0
Walking in your local area alone after dark	18 (20.22%)	**45 (50.56%)**	20 (22.24%)	5 (5.62%)	1 (1.12%)

### 3.2- Compared to other neighborhoods, do you think yours is More Safe, Less Safe or About the Same?

More safe	Less safe	About the same	Total
54	3	33	90
60.00%	3.33%	36.67%	100%

3.3- Do you think your neighborhood is getting safer, less safe, or staying about the same?

Getting safer	Getting Less safe	About the same	Total
14	10	**66**	90
15.56%	11.11%	**73.33%**	100%

4- Living Standard

4.1- What is your annual household income?
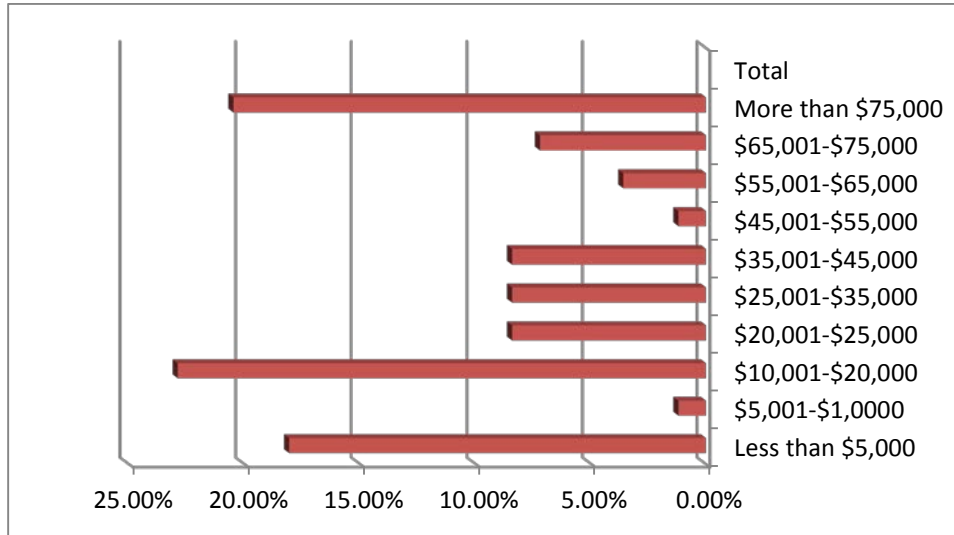
57.68% of respondents have less than $35,000 annual household income and only 27.71% of them more than $65,000.

4.2-How satisfied are you with your standard of living? (Please use a scale from 0-10, where 0 is completely dissatisfied and 10 is completely satisfied)

|	0	1	2	3	4	5	6	7	8	9	10
Your standard living	0	2 2.25%	2 2.25%	7 7.87%	11 12.36%	16 17.98%	11 12.36%	11 12.36%	**19** **21.35%**	3 3.37%	7 7.78%
Your Health	0	1 1.14%	1 1.14%	2 2.27%	2 2.27%	13 14.75%	9 10.23%	14 15.91%	**22** **25.00%**	15 17.05%	9 10.23%
Your currently achieving in life	0	3 3.57%	4 4.76%	4 4.76%	15 17.86%	**20** **23.81%**	9 10.71%	15 17.86%	4 4.765	5 5.59%	5 5.59%
Your personal relationship	0	2 2.27%	3 3.41%	3 3.41%	0	13 14.77%	8 9.09%	15 17.05%	**20** **22.73%**	16 18.18%	8 9.09%
Feeling part of community	0	2 2.27%	5 5.68%	3 3.41%	**16** **18.18%**	15 17.05%	14 15.91%	13 14.77%	12 13.46%	4 4.55%	4 4.55%
How safe you feel	0	0	0	2 2.27%	2 2.27%	15 17.05%	10 11.36%	15 17.05%	15 17.05%	**16** **18.18%**	13 14.77%

-Feeling part of the community in 46% is below the average. Majority assess their health, personal relationship and feeling safe above than normal. For 46% level of living standard is on average and lower than that.

4.3-interfering work and family life
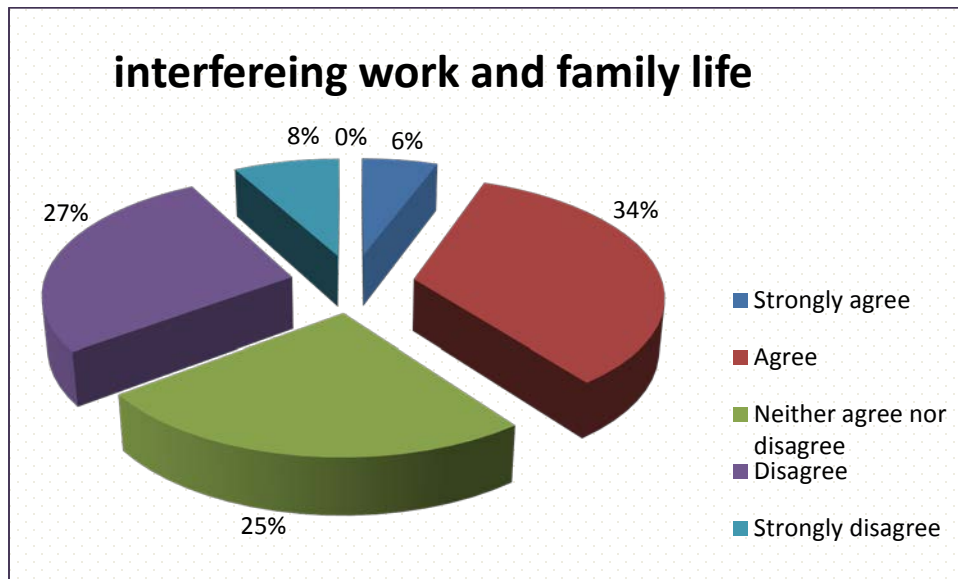
40% of respondents agree that their work and family life interfere with each other and 35% disagree.

4.4-feeling in average

4.5-Satisfaction of financial situation
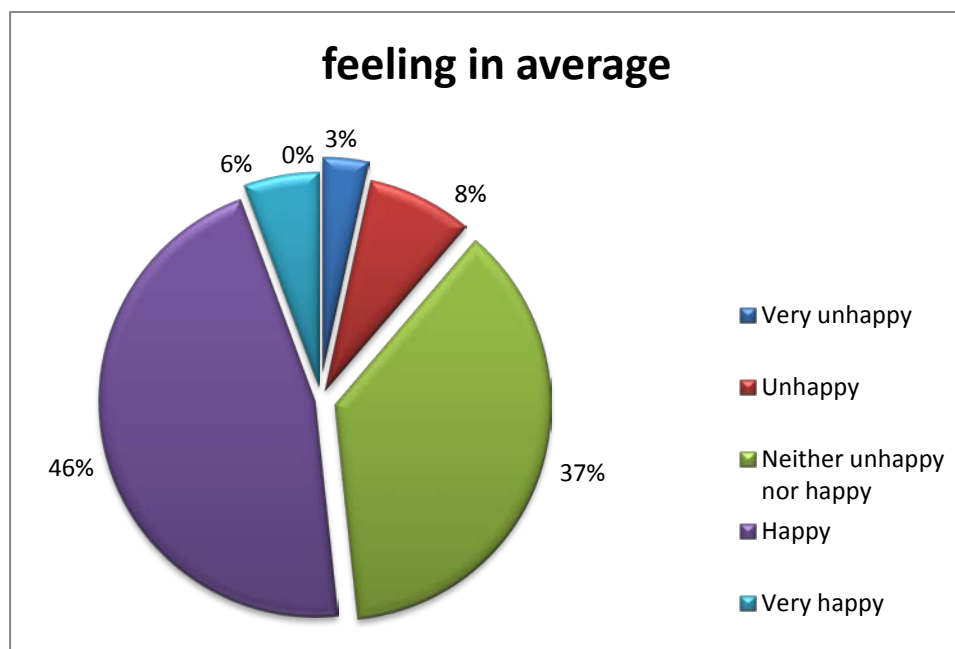
Satisfaction of financial situation
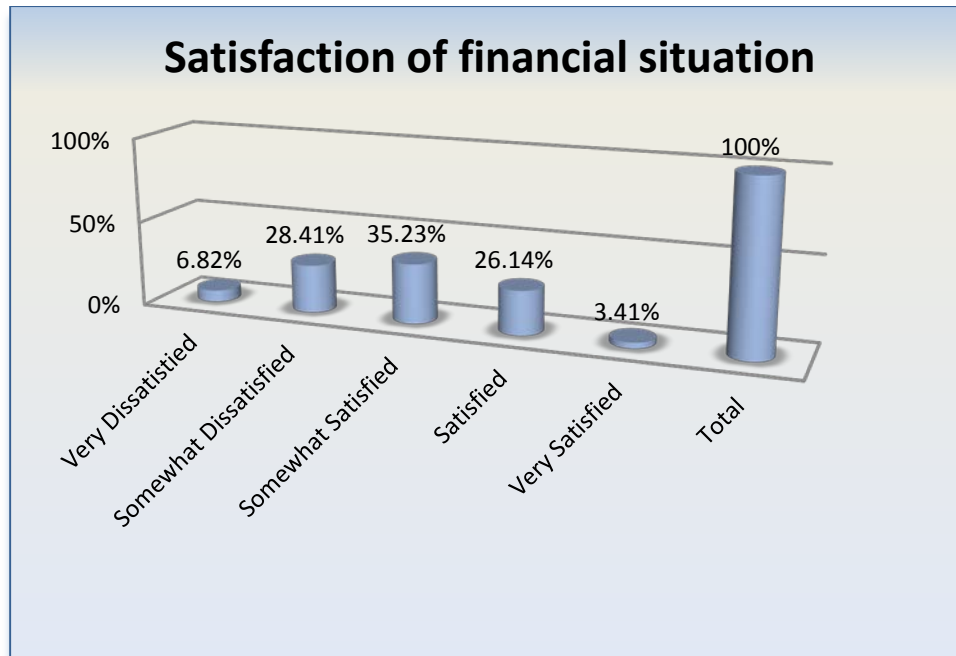
-29.5% of respondents are satisfied and very satisfied of their financial situation.

4.6-Housing situation
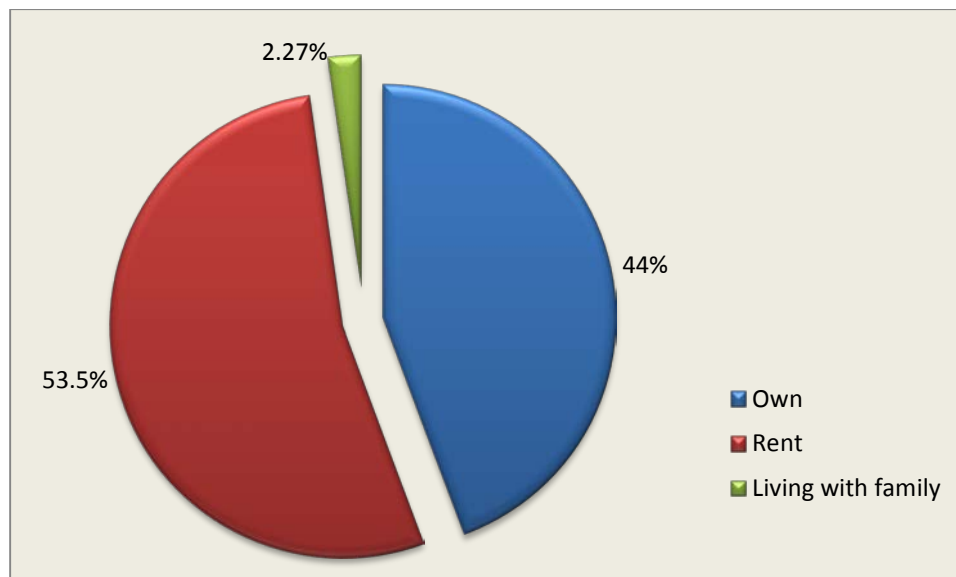
-44% of respondents have their own house and 53% are on rent.

4.7- percentage of income for on housing

-76% of respondents spend more than 30% of their income for housing.

5-Health

5.1-health situation

-92% of respondents are in excellent, very good and good general health situation.

5.2- How often do you smoke cigarettes or any tobacco products

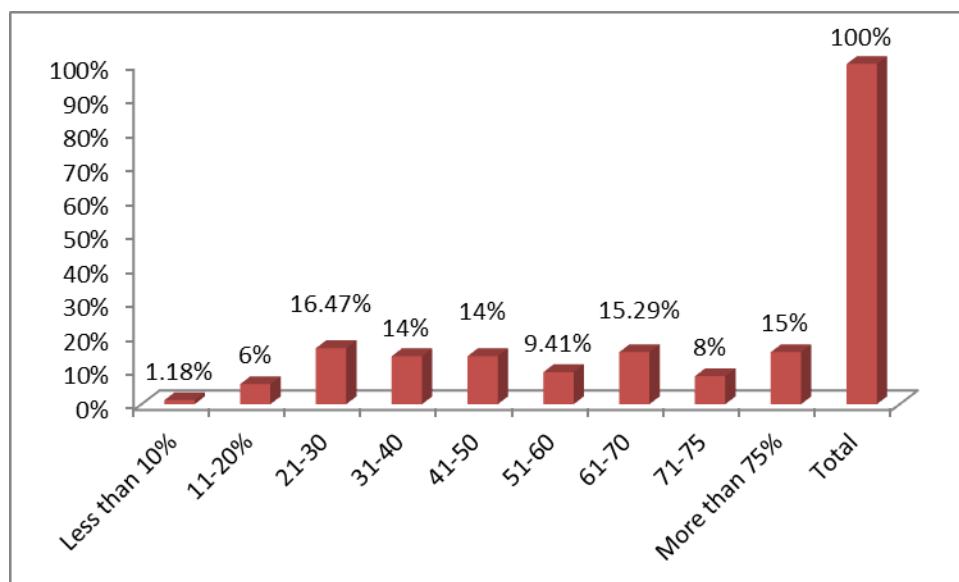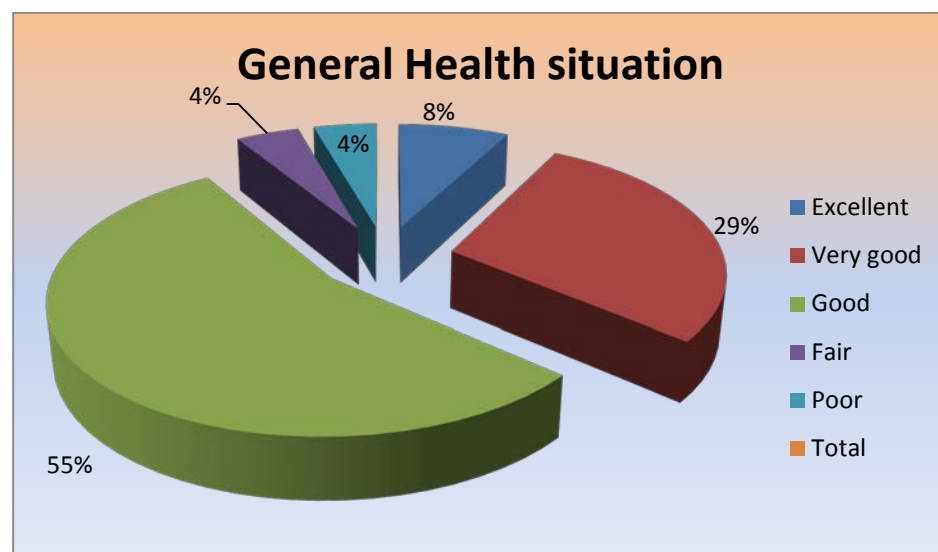**how often do you smoke cigarettes or any tobacco products**

- 10%
- 1%
- 1%
- 88%

■ Daily
■ At least weekly
■ Less often than weekly
■ Not at all.

6-Civic engagement and Community participation

6.1- In the last 12months,have you done any of the following?

	yes	%	No	%
Attended a community meeting, public hearing or discussion group	29	32.58	60	67.42
Met with, called or sent a letter to any local politician	12	13.48	77	86.52
Joined a protest or demonstration	4	4.49	85	95.51
Signed a petition	11	12.79	75	87.21

6.2-participation in any neighborhood organization

Participation in any neighborhood organization

- 25%
- 75%

■ Yes
■ No
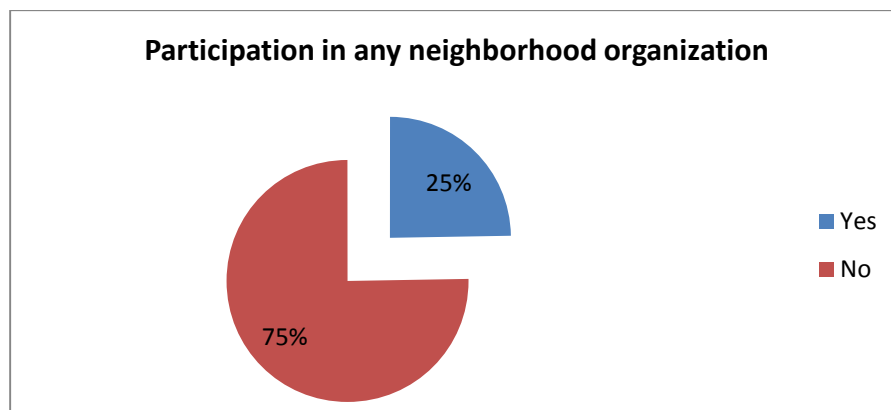
- 75% don't participate in any neighborhood groups or organizations.

6.3-Attending in the community events in the last year

Attending in community events in the last year

- 0
- 1 -3
- 4-7
- 8-11
- 12 or more
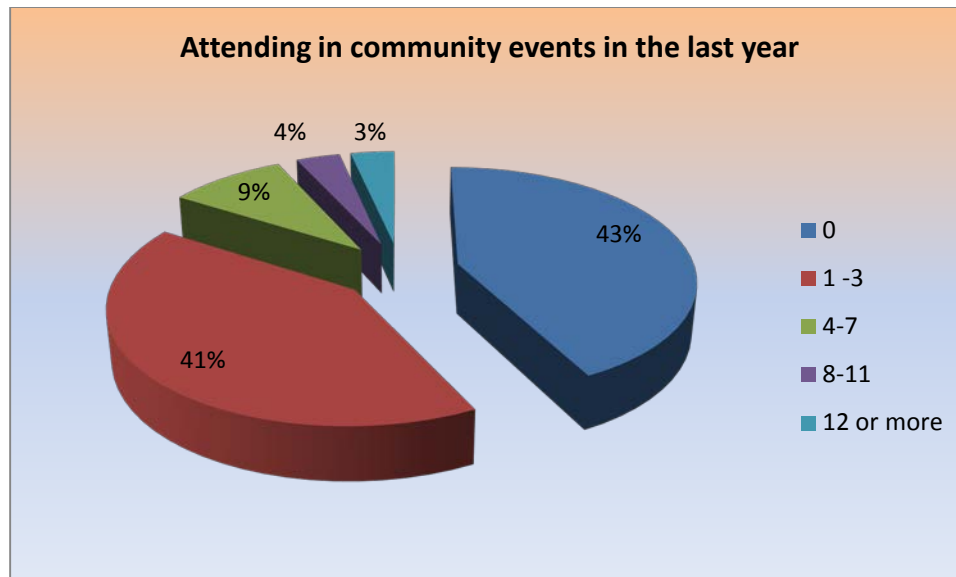
-43% of respondents never and 41% only 1-3 times attended in their community neighborhood events.

Personal Observation

During conducting the survey, I have observed many of the residents feel that responding to surveys does not cause any change to their lives and did not want to participate. Of those, some people had lack of reading English skill too. Also among a number of respondents, there were some who did not answer the questions in an honest way! For example: many of them answered "we are happy, in our neighborhood people get along with each other or People around here are willing to help their neighbors". But after, they mentioned that their answers were not true! When I asked them why they did in this way their response was: Because lack of trust. So, some questions have this kind of bias like: percentage of unhappiness and lacking of sense of belonging which will be more than survey`s result.

Conversation and Conclusion:

In order to effectively promote and sustain the health and well-being in Toronto, planners, policy makers and service providers need timely and relevant information on Wellbeing indexes. This report brings together new and existing evidence related to welling in Newton brook west neighborhood. Finding presented here draw from a local community –based study, with residents who are living in this neighborhood and socio demographic data. This report is intended to be useful resource for policy makers, health planners, service providers and other interested in making Toronto a healthier and more equitable place to live for all residents.

The purpose of this report is to provide an overview of the community needs assessment based on Community Index of Well-being survey in these areas: Safety, Living standards, health, civic engagement, Volunteering and Community participation.

Based on this survey`s results, **Job, Sense of belonging and Social network** are three Main issues in the Newton brook west. And one identified issue was this question: "why people in our neighborhood have low sense of feeling part of the community and are in low level of visiting or chatting with their neighbors?

One of the issues which these results bold is high percentage of residents of the neighborhood of Newton Brook West, who express little or no feelings of belonging, a growing sense of isolation, and limited opportunities to connect with their neighbors."

First we could have a definition of neighborhood:

"I consider a neighborhood as a place where I could come to you, you could come to me, we can help each other out inside of just going pass- hi- and that`s it, I don`t even know your name".(1)

As it was mentioned before, one identified issue was this question: "why people in my neighborhood have low sense of feeling part of the community and are in low level of visiting or chatting with their neighbors?

For answering this question we can review some data from 2011 census and this survey.

- For 91% respondents (95 residents), English is not their first language.
- Of those, 65% are in intermediate level of English speaking.
- Majority of respondents are newcomers.45% of them have lived in Canada for 1-3 yrs.(15% less than 1 year,18% 4-6 yrs. and 8% more than 10 yrs.)

- 64% of respondent have graduated degree or higher. And had appropriate experience in their fields in their home country.
- 53% housing situation is rent and 44% own house.
- Only 17% have a full time job now.
- Only 12% thought that people get along with each other in this area.
- 73% never or rarely visit or chat with their neighbors.
- Feeling part of the community in 46% is below the average.
- 75% don't participate in any neighborhood groups or organizations.
- 49% said they are not happy.

Additionally, in this area we do not have many high rise buildings. So percentage of houses and bungalows are high and people rent many of these places. Also according 2011 Census, people in this neighborhood have high income (more than average) with good safety and low rate of crime. But as you see in our statistics results, the majority of residents are newcomer and jobless. So how they are in a good income level? One answer could be the most pf these people are skill worker immigrants and international educated who have saving money and can live with their saving for a period of time .for example some of them have their own home here without appropriate job and are living with their saving and some have their back home income yet. It seems that they can live and prepare their primary needs in this way for a short time but after a few years saving money would be finished and they face with more stress and challenges. After a while, in many cases they have to move to cheaper places and poorer situation more and more if they cannot get appropriate job

 Also we could remember that in a neighborhood with this kind of situation which accepts more and more immigrants without access to job according their expertise every year, we need a kind of bond between people. Because for having sustainability in a neighborhood we need relationships which are the foundation to building a community. Networks are an approach to engaging people, who may be loosely connected. in this way; people could find more opportunity to become involved in the society and getting more chance to get a job as well.

Strong neighborhood social networks can have a significant impact on our quality of life and well-being as they provide something which is vital for all of us - a sense of belonging.There is significant scientific evidence showing the positive benefits that come when we connect with people locally. These can include reducing the risk of depression, lowering the risk of heart disease and increasing how long we live. [5][6]

Our well-being increases when we talk regularly with our neighbors. Neighborhood networks help us avoid becoming isolated and provide a source of support - for

example, looking after our house when we're away or helping with informal childcare. [7]Our local communities also provide us with opportunities to do things for others - to give as well as receive support - which has also been shown scientifically to increase well-being. [8]Social interaction in our communities increases feelings of trust and belonging. [9] This is a powerful thing that can have a positive impact not only on those who are directly involved in the social network, but on our community as a whole.
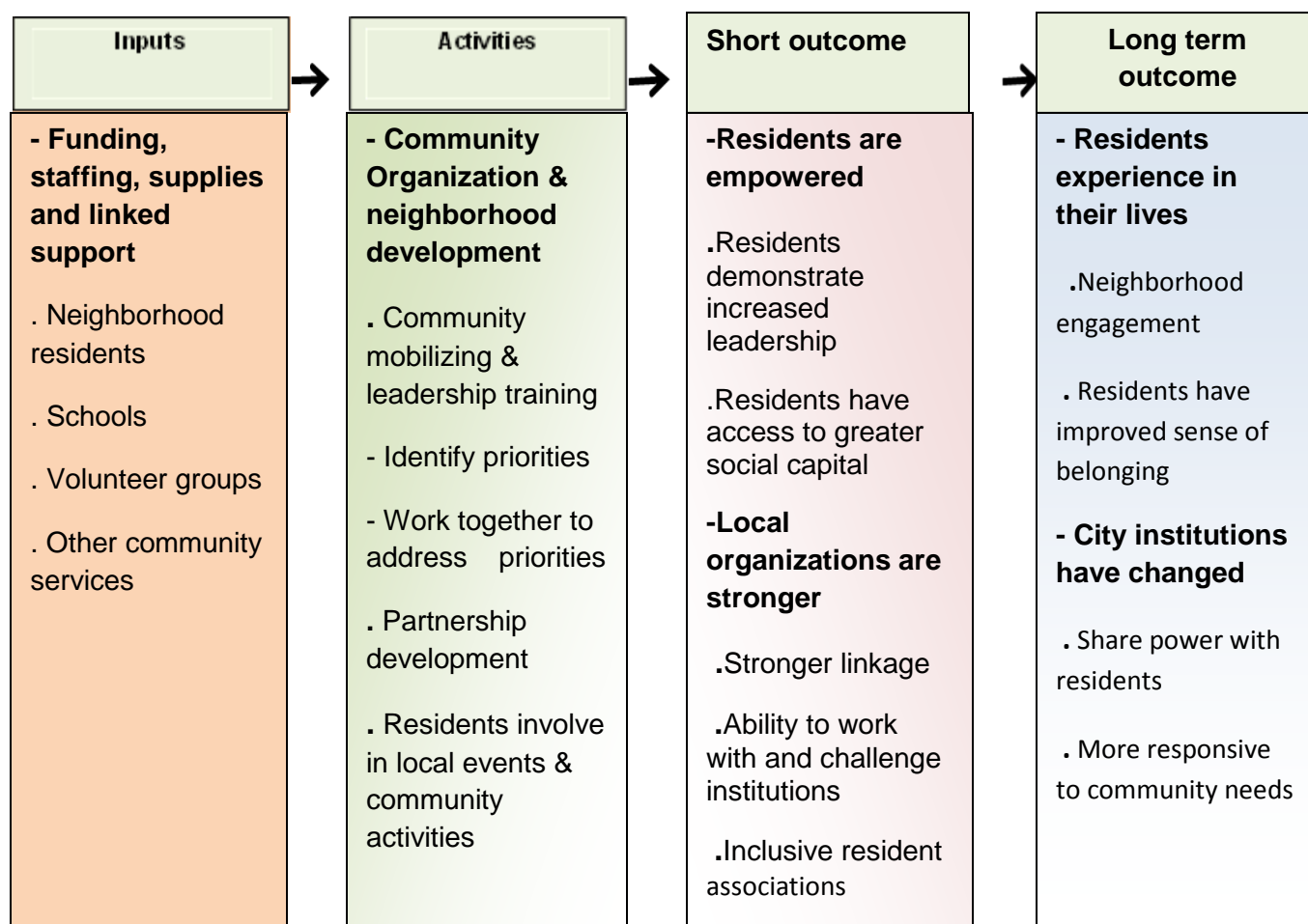
When we know and trust our neighbors we feel safer. [10] We are less likely to fear crime in the local area and more likely to expect that people in the area would intervene in the event of anti-social behavior. [7] When we feel safe we are more likely to make use of public spaces in our local area and to leave our homes after dark.

One recommendation for my community could be establishing a Neighborhood association (Leadership Neighborhood Club) for improving social network between Newton brook residents due to value the experience of new skilled immigrants and existing residents for their integration in Canadian society. There are several services works in isolated way and there are not effective coordination between them in this community (like Churches, schools, Recreational center and two parks with enough spaces for running local events and traditional ceremonies. Few community based programs are administered each year in this neighborhood and residents have to go far for attending to many events and community based activities. We can use of this services for holding our meetings with their participating in our club/association and their support for identifying many issues and running some events in this neighborhood. In these Ways residents sense that they have a place to go, improve their relationship, be more familiar with other ethnic groups, say they problems and get help. Also through improving Social network they can reach more opportunities for getting a job.

In this manner we would have effective neighborhood meetings which could lead residential satisfaction and more community local events and volunteers .After a while we could have stronger social network and well mentioned public spaces in our neighborhood.

Recommendation for Newton brook west based on Logic Model

Inputs	Activities	Short outcome	Long term outcome
- Funding, staffing, supplies and linked support . Neighborhood residents . Schools . Volunteer groups . Other community services	**- Community Organization & neighborhood development** **.** Community mobilizing & leadership training - Identify priorities - Work together to address priorities **.** Partnership development **.** Residents involve in local events & community activities	**-Residents are empowered** .Residents demonstrate increased leadership .Residents have access to greater social capital **-Local organizations are stronger** .Stronger linkage .Ability to work with and challenge institutions .Inclusive resident associations	**- Residents experience in their lives** .Neighborhood engagement . Residents have improved sense of belonging **- City institutions have changed** . Share power with residents . More responsive to community needs

Design issues to consider
- Engagement methods - Need for independent facilitation - Location and accessibility - The number and type of engage people - Child care need - Needs for outreach activities - Formal publicity materials
Barriers
- The capacity and ability of different stakeholders to participants. - Hard to reach groups such as young people. - Elder people, minority people, socially educated people. - Level of community infrastructure - Gaps of information - Literacy and numeracy level and dominance of oral culture. - Different culture and believes

Acknowledgment

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