



Social Enterprises
Knowledgeable Economies
and Sustainable Communities

“A Place to Learn, Work, and Heal” An Evaluation of Crocus Co-operative

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**A research report prepared for the Northern Ontario, Manitoba,
and Saskatchewan Regional Node of the Social Economy Suite**

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Entreprises sociales
économies intelligentes
et communautés durables



“A PLACE TO LEARN, WORK, AND HEAL”

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JULIA BIDONDE AND CATHERINE LEVITEN-REID



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INTRODUCTION

THIS REPORT PRESENTS AN EVALUATION OF CROCUS CO-OPERATIVE, a nonprofit organization for individuals with mental health disabilities located in Saskatoon, Saskatchewan. The purpose of the evaluation is to explore whether the organization supports the mental health of its members and to assess whether Crocus's programs, services, activities, and structure could be improved.

About Crocus Co-operative

Crocus Co-operative has twenty-eight years of experience working with people with mental health disabilities. Members define Crocus as “a place to find companionship, understanding and support; a place to learn, work and heal” (Crocus Co-operative n.d.).

Approximately one hundred people form the core group of individuals who go to Crocus on a regular basis. However, the organization has a total membership of approximately sixteen hundred people, with new members joining every week. Individuals become members of Crocus by purchasing a lifetime membership at a cost of one dollar. The organization operates from 7:30 AM to 5:00 PM, Monday to Friday.

Members are not required to have a medical referral or diagnosis to join the co-operative. Many members also suffer from other health issues such as obesity, diabetes, or substance abuse, and a large percentage of them are transient, with no permanent home.

Although both men and women are welcome at the co-operative, male members outnumber females. Other demographic information is not available since only minimal details are collected from individuals when they become members.

The organization's main source of support comes from the Saskatoon Health Region, although it also receives donations and grants from other sources. The health region's on-going commitment has been fundamental to the development of Crocus's core programs. Further, Crocus recently became a member of the local United Way and receives substantial support through this source.

Crocus is a consumer-led organization, meaning that its board of directors consists predominantly of individuals with mental health disabilities; 51 percent of the board is made up of consumers and 49 percent consists of community representatives. Crocus is a drop-in centre and offers a variety of programs including horticulture therapy, recreational opportunities such as walks and drumming, sleep and laundry rooms, a meal program, and a transitional work program.

Crocus maintains connections with other mental health organizations in the city and refers its members to other community-based organizations that provide services such as housing and emergency food.

A Note on Terminology

In this report, the terms "members" and "consumers" are used interchangeably in the context of Crocus Co-operative.

BACKGROUND AND LITERATURE REVIEW

The Prevalence of Mental Health Disabilities

SEVEN PERCENT OF CANADIANS (NEARLY 1.9 MILLION) HAVE BEEN diagnosed with a mental illness. An additional 6 percent (1.6 million) of people suffer from a mental health disability but remain undiagnosed (Lim et al. 2008). According to the Canadian Mental Health Association (CMHA 2010), mental illness affects Canadians of all ages, cultures, and educational and income levels. CMHA estimates that 20 percent of Canadians will experience a mental illness in their lifetime such as depression, bipolar disorder, schizophrenia, or anxiety disorders.

In Saskatchewan, the prevalence of fair or poor mental health for those twelve years of age and older is 4.9 percent; this is slightly higher than the country average (Public Health Agency of Canada — CD infobase 2010). There is also variation within the province, with fair or poor mental health fluctuating from 4 percent in the Five Hills Regional Health Authority in the south to 11.8 percent in the Mamawetan/Keewatin/Athabasca regions in the north. In the Saskatoon Regional Health Authority, the district in which Crocus Co-operative is located, the percentage of individuals with fair or poor mental health is 5.1 percent.

In 2000–01, 7.1 percent of Saskatchewan residents were at probable risk of depression (Health Services Utilization and Research Commission 2002) and this trend continues to increase. Anxiety disorders and disruptive disorders are the two most prevalent mental health issues in youth and children in the province (Neudorf et al. 2009). Depression and severe cognitive impairments (e.g., Alzheimer’s disease) are most common in the aging population, and almost 40 percent of the elderly who are being cared for are suffering from depression (Killaspy et al. 2005).

The Cost of Mental Illness

Mental health disabilities are not only serious; they also have a major impact on the Canadian economy in terms of productivity losses and health care costs (Lim et al. 2008; Stephens and Joubert 2001). According to a Centre for Addiction and Mental Health study by Quirion (2009), the annual cost of mental health to the economy is \$51 billion. Health Canada (2002) has identified that direct government funding for the provision of mental health services totalled \$4.7 billion in 1998, which includes hospital and physician care, other institutional care, and prescription medications. Short-term sick days, long-term disability, and premature death accounted for additional indirect costs of \$3.2 billion, although this amount was not restricted to diagnosed disorders. In 1999, 3.8 percent of all admissions in general hospitals (1.5 million hospital days) were due to anxiety disorders, bipolar disorders, schizophrenia, major depression, personality disorders, eating disorders, and suicidal behaviour. Between 2004–05 and 2006–07, rates for mental disorder hospitalizations in the core neighbourhoods of Saskatoon — where Crocus Co-op is located — were 769.8 per 100,000, nearly twice that of other Saskatoon neighbourhoods (Lemstra and Neudorf 2008).

Individuals with mental health disabilities are commonly excluded from the labour market and require social assistance (Killian and Becker 2007). Given the cyclical and

unpredictable nature of the disease, establishing a long-term, stable employment history for individuals with mental illnesses can be challenging. People with serious mental illnesses also experience high degrees of discrimination and significant barriers to accessing meaningful paid employment. Further, inflexible social assistance programs make it difficult for individuals with mental health disabilities to transition to work, since this may result in losing their health benefits or may make them ineligible for further government support (Church 2006).

The Organization of Mental Health Services

The Canadian Psychiatric Association (CPA n.d.) argues that Canada is the only G8 country without a national mental health strategy and further, that government expenditure for mental health is declining. This is in contrast to other countries such as New Zealand, the United Kingdom, and Australia, which have actually increased their level of spending on the problem (Killian and Becker 2007). The Canadian Mental Health Association (2011) emphasizes that “the need for a strategy on mental health and mental illness for the people of Canada is critical.”

Although the federal government collaborates in a variety of ways to develop and coordinate mental health service systems, provincial and territorial governments have primary jurisdiction over planning and delivering these services in Canada (Steinberg 2001). The mental health system, in turn, consists of different entities, including psychiatric hospitals, general hospital psychiatric units, and community mental health programs (Wasylenski et al. 1994). Professionals such as psychiatrists, psychiatric nurses, and general practitioners are also part of the circle of care but are disconnected from other elements of the delivery system (Kates and Ackerman 1997). Additional services that address some of the complex issues facing individuals with mental health disabilities, such as financial problems, lack of housing, and employment barriers, are typically administered by other government departments as well as community-based organizations that are also disconnected from the circle of care. Co-ordination between treatment and support services is generally lacking, although service providers are increasingly recognizing the potential benefits of more effective collaboration between sectors (Innova Learning 2007).

The system also consists of community-based organizations controlled by individuals with mental health disabilities that focus on recovery in a nonclinical manner (Health Systems Research Unit 1997; Trainor et al. 1997). The literature identifies two types,

although they seem to overlap significantly. The first, the self-help organization, focusses primarily on peer support. Characteristics of these associations include “mutuality, voluntariness, egalitarianism and nonmedical orientation” (Segal et al. 1997, 457). The second, referred to as the “consumer” or “consumer/survivor” organization, extends its activities beyond those of self-help organizations to include employment training, advocacy, or enterprise development (Health Systems Research Unit 1997; Trainor et al. 1997). Its structure, however, is the same as the self-help organization in that individuals with mental health disabilities control decision making and program planning, through either a nonprofit or co-operative legal framework. Given the range of activities it offers its members, Crocus Co-op can be considered a consumer/survivor organization.

The Role of Consumer Organizations in Mental Health

The literature focussing on organizations similar to Crocus Co-operative suggests that involvement has positive benefits such as improved health status, increased feelings of support and self-confidence, and greater employment opportunities (Fairholm et al. 2003; Mowbray and Tan 1993; Nelson et al. 2007; Ochoka et al. 2006; Trainor et al. 1997).

A recent study found that individuals involved in such organizations over a three-year period experienced significantly more positive outcomes than individuals who participated for a shorter period of time (one and a half years) or not at all (Nelson et al. 2007). They became more integrated into the community; had greater involvement in either volunteer work, paid employment, or educational opportunities; experienced less anxiety and depression; and reported better quality of life with regard to daily living activities. In-depth interviews with a subset of participants involved in the same study found that individuals involved in these organizations were able to develop support networks. Their involvement also gave them a chance to speak with others who shared similar experiences and provided them with a place to go rather than remaining isolated in their own homes. Further, these individuals reported better health and reduced feelings of hopelessness compared to people who did not participate in consumer-controlled mental health organizations (Ochoka et al. 2006).

An evaluation of six consumer-controlled drop-in centres revealed that they positively affected participants’ lives in a number of ways. Individuals reported the growth of friendships, a decrease in the use of hospital services, and an increase in self-confidence (Mowbray and Tan 1993). Trainor et al. (1997) also found that participation in consumer organizations

resulted in decreased hospital stays, fewer visits to doctors, and less use of outpatient and crisis services. As with Mowbray and Tan (1993), these researchers also found that involvement provided consumers with opportunities to connect with others and build their self-confidence.

In-depth interviews with approximately eight members of a co-op operated by consumer/survivors explored how these individuals defined appropriate health outcomes for such a business and whether they were being met through their involvement in the venture (Fairholm Mader and Conn 2003). Health in this context had two dimensions: establishing greater social connections with both other consumers and nonconsumers, and building skills and self-confidence. Participants felt that the organization had met both goals; they had developed new relationships and learned new work-related skills as well as anger and conflict management. Further, even though the coffee shop closed its doors after approximately three years, many of the members felt they were able to pursue different work and volunteer opportunities because of their involvement in the enterprise.

Research on outcomes has also uncovered some of the qualities and characteristics that consumers feel are important in this type of organization, as well as their perceptions of these enterprises compared to other mental health programs and services. Ochoka et al. (2006) found four important characteristics:

- the environment is safe, nonjudgmental, and accepting
- the organizations serve as social spaces where individuals with similar challenges can meet
- the organizations allow for active consumer participation, which gives those involved the opportunity to deconstruct and reconstruct what it means to suffer from mental health problems
- the organizations are spaces where connections and new relationships can be built

Mowbray and Tan (1993) found that consumer/survivors positively rated consumer-controlled drop-in centres compared to other types of mental health organizations; survey respondents reported that they offered a less structured and more supportive environment as well as greater freedom. Participants in another study (Trainor et al. 1997) reported that consumer-directed initiatives were more beneficial to them than both hospitals and other community-based programming. They also felt that their peers were of greater help to them than the services offered by professionals or by family members and friends without mental health disabilities.

METHOD

WE USED A PHENOMENOLOGICAL CASE STUDY APPROACH TO conduct the evaluation of Crocus Co-operative. Phenomenological research is the study of lived experiences with the aim of gaining a deeper awareness of the nature and meaning of everyday life. It is well suited to studying the experiences of those with mental health disabilities and those who work with them (Creswell 2006; Moustakas 1994). The study was approved by the Advisory Committee on Ethics in Behavioural Research at the University of Saskatchewan.

Participants

We used a criterion sampling strategy to select participants who had knowledge relevant to the questions under study (Patton 2001), focussing on consumers, staff, and volunteers involved with Crocus because each group had unique experiences and points of view about the organization. We conducted interviews with staff and volunteers primarily to understand the function and goals of the organization. We interviewed members to determine whether the organization supported their mental health and to assess whether its programs, services, activities, and structure could be improved.

Participants in all groups had to be over nineteen years of age, have been involved with Crocus, be able to participate (i.e., have the cognitive ability to follow a conversation and willing to share feelings and experiences), and be able to use a digital camera. We conducted one-on-one interviews with seven members, five staff, and three volunteers.* We made several attempts to interview four additional members but were not successful. We organized one focus group with seven consumers, two staff, and four volunteers.

* Crocus staff provided an initial list of fifteen names and telephone numbers and successfully made contact with seven members. They gave us names for four additional members, and while we made several attempts to conduct interviews, none was successful. Regarding the recruitment of other participants, one volunteer initially accepted the invitation to participate but subsequently withdrew from the study.

Data Collection

The research took place over a five-month period, during which we conducted the face-to-face interviews and the focus group, and gathered participant-generated photographs and field notes to help us gain a holistic view of the organization (Creswell 2006). The interviews were the primary source of data. They were semi-structured, lasted approximately one hour each, and were conducted by the first author. We generated the interview questions inductively rather than theoretically and used probes to clarify answers as needed. We prepared a draft interview guide before conducting fieldwork and had it reviewed by the executive director of Crocus Co-op.

To support the transcripts and help us see the world through the eyes of Crocus members (Patton 2001), we also invited participants to take photographs representative of the organization. Most participants used the digital camera immediately after the interview, and the researcher then downloaded the images to her laptop. To remove researcher bias from the interpretation of the images, participants described the photographs themselves (Patton 2001).

After each interview, the first author wrote both descriptive and reflective field notes, documenting objective descriptions of the participants, interview locations, events surrounding the interviews, and conversations outside the interviews. Reflective field notes recorded perceptions of rapport, participant engagement and comfort with the interview process, non-verbal body language, and preliminary thoughts about the information provided. The field notes were an important source of information and also helped the first author return conceptually to the interview setting during data analysis (Patton 2001).

Data Analysis

We each completed a line-by-line thematic analysis, reading the interview transcripts numerous times to identify significant phrases, then highlighting and coding phrases that revealed the everyday experiences of participation in Crocus. We continually compared phrases to determine whether they should be classified separately or whether they belonged

to an existing code (Wolcott 2001). We gathered conceptually similar phrases together into thematic statements that captured the essences of the experiences (van Manen 1997).

To ensure a consistent interpretation, we conferred throughout the analysis to better understand the relationships revealed by the data and the meaning of participants' statements (Meadows and Morse 2001). If there were discrepancies in a code or its placement, we discussed the issue until we reached a common understanding. We used interview data from field notes to verify (i.e., triangulate) the themes that emerged from the interviews.

Trustworthiness

Data is said to be trustworthy if it accurately captures the thoughts and experiences of research participants. We enhanced the “truth value” or “credibility” of our data in several ways. One method was data saturation: we held interviews until the data gathered from participants became repetitive. The first author also established rapport with participants by attending daily lunches and coffee times, and by spending time in the organization's main lounge. Finally, we used theoretical triangulation to add to the credibility of the study, situating the research question within current literature pertaining to mental health, consumer organizations, and mental health programming in the Canadian context.

Note that although member checking is “the single most important action inquiries can take, for it goes to the heart of the credibility criterion” (Guba 1981, 85), the transient nature of the participants meant that they were not contacted to review their transcripts.

Confirmability of the findings was supported by the use of multiple data sources — interviews, photographs, and field notes. To further reduce research bias, we undertook investigator triangulation (Creswell 2006). Together, we possessed knowledge in disability issues, co-operatives and governance, the social economy, and qualitative inquiry. To bring dependability to the interpretation of the data, we coded it independently and determined emergent themes collaboratively. We kept an audit trail to document methodological decisions, contextual notes, analytic comments, and other information pertaining to the process and progress of the study (Meadows and Morse 2001). This report includes numerous excerpts from interview transcripts to assist readers in understanding the basis upon which themes and subthemes were developed.

Limitations

This evaluation does have limitations. The first is that program staff invited participants to take part. While we took this approach to ensure that Crocus members would feel as comfortable as possible asking questions about the project, it may have led to selection bias. Staff, for example, may have inadvertently invited more active or outgoing members to participate. A second issue is that the research features a small number of participants. However, the findings of this evaluation overlap significantly with those of other studies on the effectiveness of consumer-run organizations. As a result, we feel that the findings here are transferable to, or can contribute to our understanding of, other community-based, consumer-controlled, mental health initiatives.

FINDINGS

FINDINGS ARE BASED ON INTERVIEWS WITH CONSUMERS. THE goal was to determine whether the organization supports the mental health of its members and to assess whether its programs, services, activities, and structure could be improved. We include excerpts from interviews with staff and volunteers in this section to exemplify or explain the goals of the organization. Excerpts from staff and volunteers that focus on the role of Crocus in supporting the mental health of its members are in Appendix A, while suggestions regarding how to improve programs and services are in Appendix B.

Supporting Mental Health

During interviews, members spoke directly of Crocus's role in supporting their mental health:

[I have an] improvement of self-worth.

When Crocus came along it was here and it made quite a bit of difference — quite a bit of difference.

It played a role in my mental health that winter. Yeah it helped me — it helped me.... It was eight years ago and after a while I got better — paranoia is the worst. I got better and that’s about the only real time it’s helped me as a kind of a mental health emergency.

It has helped me a little bit; in a small town you don’t have access to doctors, or medication, or support groups, or anything. I really appreciate it here — I’ve got people here.

Three themes emerging from the interviews, photographs, and field notes reveal how Crocus plays a role in supporting the mental health of its members. The first theme focuses on the kind of space it provides: Crocus is described as a family and a “home away from home”; Crocus is nonstigmatizing, nonclinical, and it provides unstructured opportunities to participate in programming.

The second theme focuses on the importance of the co-operative structure, which allows members to make contributions to the daily activities of the organization and also to have a voice in decision making. The structure also provides members with a sense of power, of shared ownership and control, and with an opportunity to develop skills.

A third theme acknowledges the importance of Crocus programming, with great emphasis during the interviews on the meal and work programs. There are three strong subthemes to the meal program: it is affordable, nutritious, and provides a chance to socialize with others. Members described the work program as providing a reliable and flexible source of employment, a means to supplement monthly incomes, and an opportunity to be with others.

These themes are summarized in the following table and described in detail below.

Crocus Space	With Us in Mind: A Co-operative	Programs and Services
Like home and family	Day-to-day contributions	Meal program : affordability; quality
Seen for who I am	Having a voice	food; socialization — eating with others
Nonjudgemental/nonclinical	Power	Work program: supplementing income;
Environmental	Shared ownership and control	responsive and reliable; being with
Unstructured opportunities	Skills development	others
to participate		Social programming
		Other services

Crocus Space

Like Home and Family

Participants commonly used terms such as “a big family” or “a home away from home” during the interviews. These everyday expressions have a deep meaning; participants spoke about feelings of care, warmth, comfort, security, and nurture.

Consumer, staff, and volunteer interviewees emphasized off the top that what makes Crocus unique is “the people,” including the people who work at, volunteer at, and use the organization. One member stated, “There are a lot of very caring people who come here as members who take care of other people and give them a little bit of kindness — as well as the staff.” An employee noted, “It is just a fantastic place here. There are great people and even if you are having a bad day they can pump you up. The people just make this place they really, really do. They’re awesome people.”

Expressions of gratitude for the opportunity just to be with others also abounded in the interviews. Three members commented as follows: “The conversations [are a good thing about Crocus]”; “It’s really good being with people and getting fresh air and sunshine”; and “This is a great hangout type place and it is absolutely needed. It is such a jewel of [this city].”

At its extreme, loss of social connectedness can lead to social and emotional isolation. Crocus provides a “family” to individuals by giving them opportunities for socialization. As explained by a member: “It was contact with people at first that I had been without. You get busy enough and you forget you’re alone.”

New and meaningful friendships emerged among individuals, which allowed them to share good times but also to help each other in times of need. Crocus members acknowledged and highly valued opportunities for social interaction, one member stating, “It is a nicer environment and I guess I am making a few friends here, too, which is good,” while a second explained, “As a person, I don’t have a best friend but I have many acquaintances and people I go for coffee with. My relationships are confined to my children and my grandchildren, but I find that one has the freedom in Crocus to make those relationships that involve having coffee together.”

By being a member or engaging in activities, Crocus members increase their number of

social contacts while also reducing stress and anxiety. One consumer noted that “[Crocus is] open and relaxed with people coming and going ... there is just an open door.”

Notwithstanding contact with others, Crocus offers a space to connect people who have similar life experiences, creating an environment in which social bonding can happen. As one member explained, “I think it is important here to have a social network for people that have mental disabilities. It gives them somewhere to go and socializing and a network — it gives them a support group.”



Crocus members explained that they feel comfortable with people around them. Some of the participants’ photographs depicted social interactions, coffee-table situations, or people sitting by each other having an amicable conversation. A friendly smile, a cup of coffee, a social outing, a friendly chat, a place to hang out where you fit in — these were some of the interviewees’ comments on the value of

Crocus Co-op. The photographs on this page, taken by two participants, focus on socializing around cups of coffee. The one above was taken by a staff person, while the one below was taken by a consumer.

The nature of mental health disabilities makes it difficult for consumers to establish and sustain long-term jobs, housing, relationships, and even associations with health-care professionals. Mental health problems can be cyclical; an individual may feel good for some time and then later become unwell. This was explained by a staff person, who noted that members “will cycle



and they will have their bad times, but it's nice to watch them grow." As a result of this pattern, consumers may have difficulties maintaining relationships. During the interviews, it became clear that care and support from family was not fully available to Crocus members. As a nonconsumer board member explained:

The families are getting tired and a lot of times, especially here, we find more chronic people, and families have cut them off because they don't know how to deal with it anymore. Or they won't have anything to do with the family because of what's going on in their head. So that's another reason why the social aspect here [is important] — a place to belong.

When asked what, if anything, Crocus means, one member stated the following during the focus group: "[Name of board member] mentioned [earlier in the focus group discussion] he was scared when he first came in and you might have that feeling when you first come in, but afterwards you can forget about it because everyone is like family." Interestingly, staff also associated feelings of home and family with the organization: "We do call this place our 'home away from home' and we do spend more time here than we probably do at home ... it's a second family for most of us."

Crocus provides its members with a dependable, nonautocratic physical and emotional atmosphere where their concerns are heard and understood. The organization welcomes everyone with a mental health disability. Members' sense of belonging was evident in the interviews: "I enjoyed being here because I was on medication and I was watching myself for my medication and I just felt comfortable being here during that time."

Seen for Who I Am

Within the walls of the organization, individuals do not feel stigmatized for having mental health disabilities. As one staff member explained, "Crocus is a social place for people — it is their first step back into the community and it is a very supportive and comfortable place to be because no one judges them here."

For members, Crocus is an organization where people with mental health problems can feel comfortable, heal, grow, and feel respected regardless of who they are, what they have done, or where they are in the cycle of their problem. During the focus group, one consumer commented, "We all suffer with mental health issues of one kind or another, and we all share that in common, and nobody says, 'This person is sick or this person is that.'"

A Nonprofessional, Nonclinical Environment

A third subtheme regarding the space that Crocus affords its members concerns its nonprofessional ambiance. Individuals with mental health disabilities are commonly in contact with professionals upon diagnosis and throughout their lives. Members, staff, and others brought up stories of consumers' dealings with professionals, some of whom are certainly from the realm of mental health care, including physicians, pharmacists, counsellors, psychologists, specialists, and nurses. Others are from social services or work placement organizations. During the interviews, individuals claimed they are often *told* what to do. Participants challenged the assumption that experts must plan, organize, and implement services for individuals with mental health disabilities. As one volunteer explained, “There is a real feeling among the members which I’ve heard, is they don’t like professionals. They don’t want nurses coming in here and telling them what to do ... there is a real suspicion and some have more professionals in their life than they want.” A member, in turn, commented as follows:

[The former executive director] asked me, “What was my psychiatrist’s name”? and I muttered something about, “I didn’t think they asked about your psychiatrist. I thought this was a place where you could get away from psychiatrists.” I don’t want to think of Crocus as being too professionalized.... I wanted, at that time [when I joined Crocus], to be free.... To be free means just to be us, not to have professionals telling us what to do — this is appropriate and that’s inappropriate.

The first author’s field notes reveal a powerful example of the importance of Crocus’s nonclinical environment. During data collection, a staff person shared the following: “It was a Halloween [get together] and I dressed up with a ‘white coat’ and carried candies in my pockets. That was not taken very well. Members came to me and said, ‘There are no doctors in this place — what are you doing?’” Despite this staff person’s good intentions, the white coat reminded members of their many contacts with professionals.

Unstructured Opportunities to Participate

A fourth subtheme regarding the space at Crocus is that it offers a myriad of programs and services, yet members experience the organization as one in which they can choose to what extent they will be involved. In other words, being active (or not) in programming is understood as a normal part of the co-operative’s operations and is one of the characteristics that

makes members appreciate Crocus so much. They may use Crocus primarily as a drop-in venue, making use of the lounge, watching television, chatting with others, and having lunch. They may also become involved in more structured activities, such as the transitional employment program. As one staff member said, “We don’t make anybody do anything they don’t want to do around here.” Another staff member explained, “It’s making choices and having the strength to do that ... you can lie on the couch or you can get your toes done. It



is truly a place for everyone, and everyone feels free to make the choices that they need to make.”

Members noted the unstructured nature of the organization during the interviews. The following two excerpts reveal the opportunity members have to make choices at Crocus:

[Crocus] is a place that you can just drop in and it doesn’t matter how long you want to stay, or if you want to talk to anybody, or if you just want to sit in the corner and just be around other people. It is just a place where you are accepted and nobody questions what you’re doing or how you’re doing.

There is a difference between Crocus and the CMHA [the Canadian Mental Health Association]. At the CMHA, you are told what to do more, whereas at Crocus you can do your own thing. That’s what I feel.

The pictures on this page, taken by a staff member during an interview, reveal the ease members derive from the freedom to participate in programming as they see fit. Regardless of whether they are part of a program or not, these images show them calm and relaxed within the organization.



Suggestions for Improvement

Despite the fact that transcripts revealed an overwhelming sense of importance associated with the space Crocus provides its members, one female member spoke of being frightened by “shady characters.” She suggested that Crocus could make the space more welcoming to female members by, for example, having more art on the walls depicting women. As this individual explained, “I would like more recognition that there are women here.” Members interviewed for this research project also expressed an interest in having the organization’s operating hours extended to evenings and weekends, which, as one consumer stated, would “give people a place to be.”

With Us in Mind: A Co-operative

Individuals with mental health disabilities play a central role in the governance of Crocus. A majority of board members are consumers, and members also participate in governance by attending monthly meetings to voice their ideas or concerns to the board. Interviews with staff, volunteers, and focus group participants all revealed this commitment to governance by members of the co-op. One nonconsumer board member, for example, made the following remarks during the focus group:

This board is so different because we are servants. This is a member driven co-op and I feel that we, and the staff too, we serve the members. We aren’t there as their landlords or their bosses and I think that’s wonderful. [Members] have a voice.... We realize who we’re serving — we’re not serving ourselves. And that’s what I really like [about] the Crocus Board is that I’m not here in charge, I am here to serve.

One of the questions we asked participants during the interviews was, “To you, what does it mean that Crocus is a co-operative?” We raised this question because the board specifically requested that we explore whether Crocus’s co-operative structure plays a role in supporting the mental health of its members.

Day-to-Day Contributions

Members typically associated Crocus’s co-operative structure with several different characteristics. Interestingly, one characteristic did not relate to decision making, but rather to day-

to-day involvement. Participants reported that Crocus is a place where everyone contributes to the daily functioning of the organization to make it a better place for everyone. One member, for example, used terms such as “sharing” during the focus group discussion and commented as follows:

We all work together and strive to be happier and healthier people. And when every member participates in programs and helping out, it makes for a better running organization. I have been in organizations where you get two or three people doing all the work and the others are sitting back waiting to see what happens.... Everybody chips in responsibility and we all work together for the better of Crocus, for the better of our friendships, our lives, and our well-being. I really love that about Crocus.

During a one-on-one interview, another member remarked, “There is an aura around Crocus where we understand the co-operative model implicitly. I think when we are supposed to pick up our dishes and coffee mugs after us, when we do that, we’re co-operating.”

Member involvement in daily activities was also captured in a photograph of a mural in the organization’s building.* One consumer describes the importance of the mural, shown overleaf:

The members had something to do with painting that and they each were so proud of themselves.... I think it’s beautiful and there’s a background and the pelican, which comes to Saskatoon. And I don’t know what kind of bird that is and behind that empty fish tank there’s sort of a hill. And there’s also bulrushes, and flowers, and lots of crocuses, and a stone and plants. I think it shows that somebody came up with the idea and somebody sort of designed it and the members put their own input into it.

Having a Voice

The second characteristic members associated with the organizational form is participation in decision making. The co-operative model is synonymous with having a voice, voting, and making decisions. One member commented:

* Crocus Co-op is no longer in the building where the mural appears, but the collaborative work involved in planning and painting it and the member’s comments reveal important information about member involvement and the sense of ownership that resulted from working together on a significant project.



Then I get a vote on things. I don't know too much about the political side of that. A co-op is run by the members.... Co-op members get a vote and then they vote on who they want to run the place for the year.

During the focus group, another member indicated that “to be part of the board, then, is to have a voice.”

Power

Interview transcripts revealed a connection between the co-operative structure and a sense of power that is instilled in consumers at Crocus. One member explained it as follows: “Why does the model work well for mental patients? It’s a question of power and freedom, I think. The co-operative model through its members’ meetings and yearly elections to the board and the structure of the board. So many members of the board have to be mental patients. I think that gives power to the members.” Comparing Crocus to an organization that does not feature consumer control as an integral feature of its governance, this member commented further: “The CMHA is a community-based, not-for-profit, and I went to the CMHA a lot in former years for [different activities] and I enjoyed it. But they are a bit authoritarian. I didn’t feel as powerful and free as I feel at Crocus Co-op.” When asked what it meant to sit on the board of directors, another member stated that it represented “power,” and explained further, “You just seem to get more input on things and you are more on top of things like meetings.”

Shared Ownership and Control

Transcripts also revealed a connection between the co-operative structure and a sense of ownership of the organization. As one member explained, “Everybody owns it so everybody has a piece of it....”

During the interviews, consumers also spoke of the fact that the organization was in the process of moving out of rented space into a building that it had recently purchased, which contributed further to a sense of ownership and control: “Instead of having this place and having double the rent ... now we have our own place and we have control.”

Skills Development

Finally, the co-operative structure was described as a mechanism that allowed for skills development among members: “It [being on the board] lets members see how meetings are conducted and they can give their input and they can learn something.”

Suggestions for Improvement

Despite the importance of the organizational form for members, they also expressed a need for education about the co-operative model. One person expressed concern about the financial liability of board members, an issue that has resulted in this individual not wanting to be on the board of directors. Other participants commented that some Crocus members are not familiar with how co-operatives operate — that members can provide input to the board of directors or run for the board themselves.

The Importance of Programs and Services at Crocus Co-op

Interviews revealed that beyond the importance of space and organizational structure, programs and services are also of great value. The meal program and the transitional employment program were noted most frequently during the interviews. This section discusses the significance of these programs for members and presents suggestions for improvements arising from analysis of the interview transcripts. Crocus’s social programming and other services are discussed in more detail below.

The Meal Program

Crocus’s meal program offers low-cost, healthy lunches and suppers, seen as a steppingstone to better mental and physical health. As one staff person explained, “The meal program is wonderful because it builds health, and healthier eating means healthier minds.” Interview transcripts demonstrated a clear link between mental health and food. One member recalled, “When I was paranoid in 2002, I still came here and I ate, which is still important when you’re ill.... Crocus helps, really helps, because of the food.” Transcripts also revealed the contribution of the meal program to members’ physical health. Responding to the question on what was most important at Crocus, one individual replied, “The meals especially, since I have had a hard time keeping up with my nutritional needs and I have found it is very helpful here.”

The program is appreciated in three different ways. First, it is affordable, providing an opportunity to get a meal at a reasonable price. During the focus group, one member commented, “Right now we pay \$3 for a meal and the meals are good. I mean you can’t go anywhere else in the city and pick up a meal for \$3 for what we get.” Another member remarked, “The food is cheap.” The meal program prices its meals to recover only the cost of the food; salaries and overhead are not included in the price charged to members.

Second, the food is high quality. Interviewees emphasized the variety, nutritional value, and freshness of the food available at Crocus, as well as the effort the organization makes to provide quality meals to its members. One member said, “The food is excellent,” while another commented, “The food is better than what is available at other locations in the city.”

Third, the meal program provides an opportunity to be with others — a chance to eat with friends, to socialize and talk, to meet someone or visit with staff and volunteers. As one staff person explained, “They are not eating alone, they are eating in communities with others.” The atmosphere around the meals is part of the whole experience. Opportunities to socialize with others start at the line up, continue at the counter, and follow up at the table. One member summarized this dimension of the meal program as follows: “It brings everybody together in a common area, too, so it’s important for the social interactions with the members.”

According to the transcripts, the meal program is considered to be an integral part of Crocus. If the meal program were to be discontinued, Crocus would not be the same for members. One individual explained that it had been the meal program, in fact, that first



drew her to the organization: “[Someone] said a person can eat at Crocus Co-op and I thought, this is what I need, so I applied to become a member.” Not surprisingly, this feeling was also reflected in the photographs members took during interviews. The person who took the picture on the left commented, “It’s important that we do have the meal program here.”

The member who took the picture

below right further emphasized the significance of the meals: “That’s probably the most popular service used here, and the food is good.”

*The Transitional
Employment Program
(The Work Program)*

Crocus operates an employment program that allows members to participate in casual work. It can be challenging for members to find employment fitted to their needs. As a staff person explained,



The people involved at Crocus are diagnosed with mental health issues and they can’t necessarily go out and work eight hours at a job or without some extra support. So we protect our people, we train our people, we mentor our people. We make sure that their work is not only putting money in their pocket, it’s a meaningful experience, and that’s the difference.

As with any consumer-owned and -operated business, flexibility is a critical aspect of this program, which offers work opportunities to all consumers who are ready and able to take

them on. Members self-identify as wanting to participate on a day-to-day basis, and the program then offers mentoring and guidance on the duties required to complete the work. The work program co-ordinator strategically balances consumers’ abilities and their mental and physical health with the jobs available, which include a moving service and yard work.

Crocus members made it clear during their interviews that the work program is significant, primarily because it provides a way to supplement their monthly income, because it is responsive and reliable, and because it offers an opportunity to be with others. Members did indicate, however, that job opportunities should be better tailored to the interests and abilities of women at Crocus.

Supplementing Income — Consumers indicated that the work program provides them with additional money to supplement what they receive through social assistance. One member described it as “coming in handy” as well as “a bit of money at the end of the week.” Importantly, the number of hours participants work is carefully monitored so they do not lose their social assistance and health benefits.

Responsive and Reliable — Participants also noted the importance of the work program’s supportive environment: “I like the support system here because I haven’t been to work for a long time and the work program is very useful.” During the focus group, another consumer noted the program’s appropriate demands on consumers’ mental health: “If you show up, you can make a couple of bucks and it is not going to ruin your life, stress wise. You are not a slave to the factory system; this is a little kinder.”

Another member explained that the Crocus program was a more reliable source of employment:

Now I am getting most of those [employment] hours through here, which is better than the other option, which is through Labour Ready and that’s a pain. Working here is just easier. The down side of Labour Ready [is] you have to get up at 4:00 in the morning if you want some work, and you can stand in line for half of a day and you don’t know whether you are going to get work or not.

Being with Others — Participation in the work program also provides members with opportunities to socialize. One consumer captured this in a photograph (next page) and explained: “It’s the broom closet, but it just shows that a lot of work goes into Crocus. Some people will use the rakes and brooms — it’s a teamwork effort at Crocus. So be part of the team. And that’s the ‘Can Do’ crew.”



Suggestions for Improvements — During the interviews and the focus group, participants suggested ways to improve the work program. Some expressed a need for new equipment. Some believed Crocus should replace their old machinery, while others pointed out that members are not careful, which causes regular breakdowns. Although members spoke about the potential of the program, they mentioned machinery as the reason why it could not expand.

Another frequent suggestion was to offer a wider range of employment opportunities. The program currently involves quite physically demanding jobs and interviews revealed that this deters many women from participating:

Some women can't handle pushing a lawn mower to cut grass, or move furniture; it's too much heavy work for them. There's a button program — some people like to participate in that. It's paid work and usually the women do the buttons.

I think the housekeeping idea is a good thing. I think they used to have it here but they just stopped doing it, but if they have housekeepers here we could have housekeeping too, or window cleaning.... Well it would give women an option for something to do rather than mowing lawns.

Social Programming

Crocus members have opportunities for unstructured and spontaneous social engagement as well as co-ordinated activities through the Social Program Committee, which aims to create activities that offer members an opportunity to fit in, and that celebrate differences and diversities. As one nonconsumer explained:

The social component is very important here.... They are rejected in so many places because of their symptoms; sometimes it's illness, sometimes it's habits, but oftentimes they're rejected by average people in society.... The social component and the belonging is just so important here.

Suggestions for Improvements — Interviews revealed that the organized social programming is not as valued as the meal or work programs. One member commented on the “poor recreational program,” while another felt that “the social recreation programming is repetitive.”

Other Services

Participants also spoke of the value of other services offered at Crocus. They described the sleep room, for example, as a safe haven for members that offers an alternative to sleeping on the street. One member commented as follows: “I think the sleep room is wonderful. The idea of refuge for people who just can't hack it. That's a main thing with Crocus is you have some refuge, and being [in] a safe place off the street is wonderful.” A volunteer explained that this service is important not only because members may not have a place to sleep of their own, but also because they may become tired as a result of the medications they are taking.

Members mentioned the convenience of the computer room, describing it as a place where people could check their email if they did not have access to the Internet at home, and as a place where people could learn new skills. Two members photographed the computer room as a place that represented Crocus. One explained that “people learn things on the computer,” while another remarked, “I like computers and I think it is a good part of Crocus to have a computer room in here.... A lot of people don't have access to computers and it's nice to get their emails; some people like playing games on them.”

Crocus also offers horticulture therapy, led by the organization’s executive director. Members and volunteers grow vegetables in containers and use them in the kitchen’s meal program. One member described the gardening as “a wonderful thing” and photographed it as an important feature of Crocus.



Interview participants spoke of the vital role Crocus Co-operative plays in connecting members with other organizations in the city such as the CMHA, the hospital, and the Housing Coalition, as well as programs and services offered by different levels of government. One individual, new to both Crocus and the City of Saskatoon, spoke at length about the key role the organization played in linking him to vital resources:

And then [the executive director] is here if I have any questions, or [if I] have trouble with Social Services, I can get advice and it is kind of the hub that gets you in with other Social Services.... This place was directly responsible for helping me get a place to live.... And this afternoon they are helping me get some furniture moved into the new place. So that’s a very positive thing. Yeah, I came from [name of city], which is a bigger city, but I have to say that there is no place like this. There are some drop-in centres but they are very particular in the sense that you’re just there to do one thing and there is not the networking that there would be here.

Another member spoke gratefully about the linkages made possible by the availability of a telephone at Crocus, which she captured in a photograph. As she explained, “It’s access to a public telephone so I can make phone calls if I need to get things done, or to find a place to live, or to use it for what you need it for.”



Suggestions for Improvements —

Interviewees raised concerns about the possibility of getting lice or bed bugs by using the sleep room: “...and that’s the crashing-out centre with the beds in it. I haven’t used it for a while, but it’s not recommended because you can pick up bed bugs that way. You don’t know what they might have brought in.”

Members also mentioned two limitations with the computer room. First, the equipment is dated and should be upgraded, and second, the computers are used to download pornography, which creates an environment that is uncomfortable for the women at Crocus and also results in police confiscating the computers.

DISCUSSION: FOSTERING MENTAL HEALTH

MATERIAL COLLECTED DURING INTERVIEWS REVEALED HOW Crocus supports the mental health of its members. Three themes that emerged from the data — the space within the organization, the co-operative structure, and the programming — help explain the success of the organization.

Crocus Space

Participants in the one-on-one interviews and in the focus group commented repeatedly on the space Crocus provides for its members. The positive observations demonstrate that the organization has succeeded in creating an environment that provides peer support, which has been linked consistently in the literature to better mental health outcomes.

Research identifying the important characteristics of peer support organizations overlaps significantly with member descriptions of the space at Crocus. The literature notes that voluntary consumer participation is necessary for these organizations to succeed (Solomon 2004). They must also provide social spaces for consumers (Mowbray and Tan 1993; Ochaka et al. 2006), and be safe, positive, and welcoming (Ochaka et al. 2006). Our interviews found all these elements at Crocus.

Second, these characteristics have been linked to better outcomes for consumers. In a study that asked individuals with mental health disabilities whether and how their participation in peer support organizations changed them, more than half the respondents reported increased confidence in various facets of their lives (jobs, education, relationships, mental health treatment). The primary factor related to this increased confidence was the support they received from others in consumer-driven centres (Mowbray and Tan 1993). Another study that found improved mental health outcomes among users of consumer organizations concluded that “the social support that members receive in CSIs [consumer/survivor initia-

tives] is likely of key importance in helping individuals to improve their mental health” (Ochaka et al. 2006, 281).

Significantly, the language used in this literature to describe the space within these organizations is similar to that used in the Crocus evaluation. Phrases such as “a chance to be with other people” and “you feel at home” (Ochaka et al. 2006, 279) are common.

While the exact relationship between supportive spaces and improved mental health is unknown, several possible explanations have been put forward (Solomon 2004). One rationale is that these spaces buffer people with mental health disabilities against stressors related to their mental as well as physical health. Another explanation is that these spaces nurture experiential learning, giving individuals the opportunity to meet others with mental health disabilities and discover shared experiences. This can create a sense of validation, build confidence, and help people understand how others cope. Another possibility is that individuals may find role models in these spaces, who can in turn lead them to make positive changes.

While the analysis of the transcripts confirmed that Crocus provides a supportive space for its members, changes should be made to help women feel more comfortable. An important feature of peer support organizations is that they reflect the community they are striving to assist. Individuals with mental health disabilities are more likely to join these organizations if they feel they are represented in terms of gender or cultural background (Solomon 2004). Specific suggestions from the Crocus interviews include incorporating art that reflects women and taking other steps to ensure that women feel as safe and comfortable as possible.

The Co-operative Structure

A second theme to emerge from the data was the importance of the co-operative structure. The co-op model gives participants the opportunity to contribute to day-to-day operations at Crocus and involves them in decision making — it gives them a voice. It also gives them a sense of power and ownership and a chance to develop skills.

Solomon (2004) argues that consumer control of peer support organizations is an essential component in building mental health. While one cannot state that there is a direct cause and effect relationship between the co-op model and building mental health, there is evidence in the literature that links them. Segal and Silverman (2002) found that participation in an organization — what they referred to as “organizationally-mediated empowerment” —

was key in explaining positive changes in personal empowerment and social functioning among individuals with mental health disabilities. Organizationally-mediated empowerment involves having the opportunity to participate in governance as well helping to organize activities, meetings, or meals — in other words, opportunities to participate in decision making and day-to-day operations.

The co-operative structure also has significance in the space Crocus provides its members. The organizational form makes members feel “free” and “at home” — i.e., the organization belongs to them and they, in turn, belong at the organization.

Programs and Services at Crocus

Interviewees felt strongly about the meal and work programs. While they also mentioned other programs and services, we focus here on the two programs that received the most attention during conversations and photo sessions. The meal program was especially popular. Members spoke enthusiastically about its affordability, its high quality, and the opportunity to socialize during mealtimes.

Consumers made direct connections between food and better mental as well as physical health. Two excerpts, also noted above in the findings, highlight these points:

When I was paranoid in 2002, I still came here and I ate, which is still important when you're ill.... Crocus helps, really helps, because of the food.

The meals especially, since I have had a hard time keeping up with my nutritional needs and I have found it is very helpful here.

Community-based mental health organizations acknowledge the importance of healthy eating in mental health recovery. In a survey of Ontario organizations, more than half the respondents (N=77) felt that good nutrition was an effective means to improve mental health. More than half the organizations that responded were also involved in delivering related programming (Gates 2010).

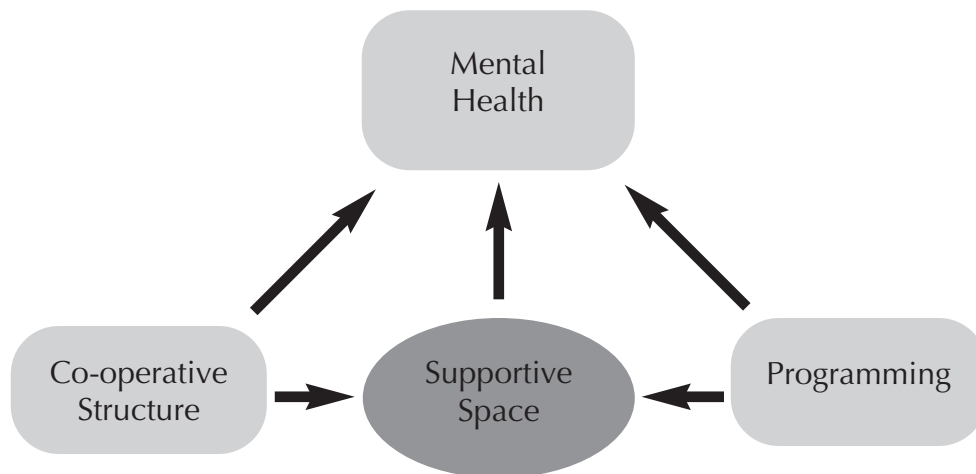
There is also evidence that supports a relationship between healthy foods and certain kinds of mental illnesses (Solomon et al. 2010; Zukier et al. 2010). A cross-national study on diet and depression, for example, found a strong, positive correlation between rates of sugar consumption and depression (Westover and Marangell 2002), while another study found

that people who consumed large amounts of processed and sugary foods were more likely to suffer from depression than those who consumed only small amounts (Akbaraly et al. 2009).

Participants also spoke of the social importance of the meal program. In this context, the path to better mental health is not via good nutrition but through the program’s contribution to creating a space at Crocus that is welcoming and supportive, which contributes to the well-being of members.

As with the meal program, Crocus members placed a particularly strong emphasis on the transitional work program. Here, too, what contributes to building mental health may be the opportunities the program offers to work alongside others in an accommodating, non-stressful environment — in other words, a supportive space. We make this analysis because participants did not speak during interviews of being empowered with new skills that might provide them with job opportunities, nor did they earn enough to make more than small, extra purchases at the end of every week. The literature supports our interpretation. Fairholm Mader and Conn (2003), in a qualitative evaluation of a consumer-run coffee shop, found that the enterprise contributed to the mental health of its workers, at least in part, because of the social support members received from each other.

The diagram below is a visual representation of how the interview data suggests that Crocus Co-operative fosters the mental health of its members. Supportive space is featured prominently in the middle, reflecting its importance in the data analysis. The co-operative structure and programming (in particular, the meal and work programs) contribute both to the supportive space and to nurturing mental health more directly.



CONCLUSION

THIS REPORT PRESENTS AN EVALUATION OF CROCUS CO-OPERATIVE, a nonprofit organization dedicated to individuals with mental health disabilities, located in Saskatoon, Saskatchewan. Our purpose was to explore whether the organization supports the mental health of its members and to assess whether its programs, services, activities, and structure could be improved. We used a qualitative, phenomenological approach in carrying out the evaluation, conducting in-depth interviews and one focus group with consumers, staff, and volunteers. We also invited participants to take pictures of Crocus to explore the aspects of the organization that were most meaningful to them. The first author was responsible for the detailed field notes.

Our evaluation found that Crocus contributes significantly to the mental health of its members, who spoke in detail about the role the organization has played in improving their well-being. Analysis of the interview transcripts identified three themes that help explain how Crocus achieves these results. The first relates to the supportive space at the co-operative, which members describe as welcoming, nonstigmatizing, and nonclinical. They also enjoy the unstructured opportunities to participate in programming. The second is associated with the co-operative structure, which provides members with a sense of power, shared ownership and control, and an opportunity to develop skills. In addition, members are able to make contributions to the daily activities of the organization and have a voice in decision making. The third theme involves programming. The meal program is affordable and nutritious, while the work program provides a reliable source of employment and a means for members to supplement their monthly incomes. Both programs also offer opportunities to socialize with others. Our findings confirm the important role that Crocus plays in the lives of its members and validate the organization's approach to doing so.

We also identified a number of improvements based on comments made during inter-

views with consumers. The most common was that the co-operative should make better efforts to tailor its space and programming to reflect the presence of female members. Specific suggestions included displaying artwork that depicts women and having work opportunities available that are less physically demanding. Making these changes would not only meet the needs of current members but would likely enhance the organization’s ability to reach out to more women in Saskatoon with mental health disabilities. Other ideas for improving the organization included providing more education to members about co-operatives and the role of the board of directors, enhancing the social programming, improving the computer equipment, and expanding the organization’s hours of operation.

APPENDIX A
Comments from Staff and Volunteers regarding
Crocus's Role in Supporting Mental Health

We have a father who comes and talks about his son and he said, "I haven't seen my son this healthy in years," and he is starting to do things with him again.... And we knew he had because we've seen him do well, but without the little bit of assistance that he gets from us he doesn't make the right decisions when he's out, and then he gets worse.

Some of the ones that would never talk to me before, they are talking to me and having conversations with me. Some days they just want to sit and not talk.

I think coming to Crocus keeps a lot of our members out of hospital for a while, or their stays at hospital are fewer between because they have the interaction here [compared to] if they were sitting in their group home and not doing anything.

[Name of consumer] is a newer member and he has only been here less than a year and I've seen some improvement with him. That's what keeps me at Crocus is watching our members grow. And then they'll cycle and they will have their bad times, but it's nice to watch them grow. When [name of consumer] first came to us, he was being a mercenary and he was signing up to be a mercenary and everything was a mercenary. He was dressed like one and he had a mercenary's card, and he doesn't talk about that much anymore. He may dress in fatigues from time to time but ...

We help each other out and we support each other; I don't know how to

describe it. If somebody is feeling weak then people will step up to help out. It's the camaraderie too.

The cutest thing I ever saw is the first guy who worked out of the work program and when he got his first cheque he went around and gave everybody a kiss. This is what makes it worth coming to work for. And this is probably the first time that anybody has ever taken him anywhere or given him a shot.

Yeah, I think the members support one another. You see them talking and someone will come in and say, "Well I have to get this or that ... or something is broken" and others will come forward with suggestions for them. Something. So I see members supporting each other. And in most cases members being tolerant of others' behaviour — outbursts and all sorts of things.

I had one chap, for instance, and he has a cognitive disability and an intellectual disability and he comes regularly and it was very important to him that Ace [the dog] liked him. "Ace really likes me," [he said]. And I said, "Yes, and you are one of the first people that he really liked." Well this gives him a huge charge.

So what they began to notice is that when they didn't have a meal program, members were being hospitalized frequently, several times over the year. And when they had their meal program, and it was just lunch, what they began to notice was, "John hasn't been hospitalized this winter."

He [a member] wouldn't have made one week out of jail without the program at Crocus.

The food program, especially the way they're doing with the strong learning component providing two meals a day, five days a week — that's fabulous! That's keeping a heck of a lot of people out of the hospital...

People that have been here for years have just grown — it's just wonderful. It's just wonderful to see the changes in them. Somebody who was in charge of the Mental Health Association years ago came to a function at Crocus and was so pleased to see people healthy and functioning and doing well.

We had this one woman ... with mousy hair and she had very bad teeth and she hunched over all the time. As she stayed here, her posture got better and

she started emulating one of the staff. One of the staff went and got her teeth done and came back and she said, “Do you want to get your teeth done?” and she said, “Yeah.” We’ve been trying to get her to do that for years, and when she left us, she went on to this makeover show on TV and had a makeover, and I was astounded, just astounded, from this little person who wouldn’t even talk to us, to find out what a wonderful woman she was.

When I think of family, I have a lot of outside family, not just mom, dad, my sister, and that; I have a lot of friends that I consider family and that’s what Crocus is for these guys. I can think of one member in particular who is having a lot of issues with his family, and there is outside involvement with that, and this gives him some place to come and some people to visit with, and you always have something to fall back on, and that’s what family should be.

They feel a lot better — a lot better. Some members don’t want to go to other mental health organizations. They are very comfortable at Crocus. I asked them and they said to me, “We are comfortable. We are easy.”

[A member] ... was on his own for about ten days. We kind of filled that need for him and a year later he said, “Crocus gave me hope because they didn’t care who I was or what I had done. I was accepted and able to have a future.”

There was a guy who was here ... he loved cherry tomatoes. And the first year I was here we had a garden plot with CHEP [Child Hunger and Education Program], but it was too far away, but one day he came here and he was bloody and very badly beaten up and he was very withdrawn. He was here but he wasn’t really here, so I took him over to the garden and we were picking cherry tomatoes. He was in charge of picking one row of tomatoes and he had two in his [container] and I just laughed and said, “Where are all those tomatoes going?” and he smiled and [said] aww! And it was just like a dam had opened. He had gone for a bag of chips at 3:00 in the morning and he had gotten beaten up, and he should have been hospitalized but was in the garden because it was safe. He was just eating these cherry tomatoes, and we went back and cleaned him up and he was where he needed to be.

The biggest joy is seeing the difference that we make in people’s lives. That is so apparent every time you walk through the door, it really is, and it could

just be a member being glad to see you because you are important to them, and not me as an individual, but Crocus. When we are closed for a statutory holiday and [it's] Tuesday morning and everybody comes in and you say, "What did you do on the weekend?" and it's like it was a long weekend, it was a really long weekend, and I am so glad it's Tuesday [and] I am here at Crocus.

APPENDIX B

Suggestions from Staff and Volunteers regarding Crocus's Programs and Services

The Work Program

Improving Equipment

- The equipment issues are the major problem. For the last two years we did not buy one single piece of equipment. It's the common problem, how to use the machines properly.
- Some good equipment [is required]. The machinery is old but it still works well, but we need new tools and equipment.
- Truthfully, for the work program, we need new tools, for mowing lawns and such things like that. If we had more modern up-to-date tools we could be a lot more efficient; we would have more people on the job if they knew for sure they were going to have the tools. I don't think the manpower is the problem, it's the tools.
- The reality of having more equipment for Crocus and not having the right kind of supervision, guidance, and leadership, is it breaks, it gets broken, it's misused. We do a lot of fixing that is not really necessary and we do a lot of maintenance really that isn't up to the standard it needs to be.

More Work Opportunities for Women

- We need more variety [of work for women] like sewing, assembling, and flower making or dressmaking, more desk jobs so maybe [women] will be attracted.
- A lot of the jobs that we do with the training program are physical, like the moves, the hauls, the shoveling snow — cutting grass isn't so bad. So there aren't jobs for females. I've heard some of the females say they feel intimidated by all the males.
- Women's work — [there] are some women who aren't strong enough to lift lawn

mowers or work in heat, and I hope that could be improved for more work such as housecleaning and things like that, something that is less physical.

- The male-female ratio in the work program probably needs to change because mostly they are doing a lot of outside work, and a lot of work is too heavy for the women. So I think they could be finding work for the women but they only have one supervisor at the moment. That's a program that could be expanded — is the work program — hugely.
- There are women who would like to work; there are women who have asked me, “Why aren't there any jobs for women?”
- The transitional work program mostly provides jobs for men, so I think the guys got used to going to Crocus more so than women. Now if we had classes for the women,... maybe they need to have someone come in to teach them how to sew and they could make quilts or things they could use at Crocus. They could have a knitting group and they could knit themselves warm mitts and scarves.
- They need more female-oriented jobs, I think would help.

Expanding the Pool of Workers

- I would like to see more members that would want to work, and I don't know how we do that; it [would] be nice if there was a bigger pool of people to work.

Different Work Opportunities

- There is a huge need in this community for trained janitors — industrial cleaning, cleaning in homes, but cleaning where you go in as a group where they know what needs to be done, and the place to learn how to clean is at Crocus. They could have a janitorial program and then cleaning could be happening within the community and you would be in a nice warm building instead of being out shoveling snow in 40 below. That's okay for the young guys, but the older ones, it's too hard for them and they get too cold.
- We are looking at ways to facilitate more work. We are changing slowly and just need to be more innovative with the programs that we can get involved in.

Worker Training and Using Job Coaches

- What they need are people from the community who'll act as job coaches. I've found there is an insecurity if they are going into a place where they don't know what to do, and they don't know how to take the bus. Job coaches would be quite important and there would be a role for students.

- If they can get the students way more involved from the School of Horticulture and have a little green team down there, and the folks who are not able to do the heavy work can probably do the gardening part quite well.
- Over the years I have tried to get training for the people on the work program. I have sort of wondered if we couldn't sometime have a couple of people from a moving company come in and show people — have a little workshop on how to do this better. I don't think it [training] has ever happened. I have suggested it a few times, but I have never really had much to do with the work program.
- I think [Crocus is not doing so well] at the women and getting them more into working and cooking programs. So pull the women in more and more, and have a pre-training program: how to lift, how to move, and I'm not sure how much they do of that now.
- I would like to see [the kitchen classes] done again.

Quality Control

- We need a quality control system that allows things to be done acceptably when somebody is paying you to do a job. It is huge and very challenging.

Barriers to Member Participation

- A lot of the problem is driving. The people who come and can drive, they become quite successful and they go out in the community. Driving is a problem getting here because of the location, because very few members drive.

Other Programs and Services

Improving the Sleep Room

- My concern about the sleep room is how do you ensure that we are not getting things that other people have slept on. I think what they need is just to have a vinyl-covered bench that could be wiped off and blankets and quilts that could be laundered frequently, with a pillow — something that a person could pick up and take to their bed.
- Anybody who uses the sleep room could have a zip-lock bag with their own stuff, and once a week the people who are doing the janitorial program could launder everything and it would all go back into the slots. Somehow it could be worked out so that the bedding is individual.

Programming Focused on Addictions

- I'd personally like to see a couple of different programs that would be a little more helpful for addictions. We had smoking programs here. Other people, what they're doing with the alcohol and drugs, that is personal. But I don't think that would work here, but smoking might.
- Once we get settled, I would like to get another [nonsmoking activity] going.
- There are good programs through the Lung Association about stopping smoking, so if there was even interest, even weekly, and if [you had] at least six people, then you could invite the Lung Association to come over and do a program.

Expanding Hours

- We're closed on weekends, for crying out loud. The fellow who I told you about that was released from RPC [Regional Psychiatric Centre] — he came on a Friday and I didn't know if he would be here on Monday. We were having a plant sale on Saturday beside the Farmers' Market and he was of course living at the Salvation Army so he found us and hung around for the day. And I think that was instrumental in him making it through until Monday, I really do. Because we were there on Saturday he was going to be okay. Do we need to be open? Yes! Is it going to be an easy journey? No, because the staff are ingrained in working Monday to Friday.

Shower/Laundry Services

- The shower is functional but there are a lot of things to sort out. I'm not sure how we are going to supervise it. What do we do with clothing? How do you get the resource to get the clothes washed? Members are not allowed to do laundry here because it's a facilitation thing. How do you make sure that the machines are handled properly? As far as the shower goes, there's not one person who is employed here that has nursing training [in] those kinds of things.

The Meal Program

- Our goal is to make it be one of the best places to eat in Saskatoon. [This requires changes in how the kitchen] needs to be managed and so that's a problem.

Expanding Programming: Other Comments and Ideas

- There should be some recreational things too. For example, they could have a nice funky aerobic program there with music where people can do some exercise to music. And could somebody come in and do some yoga, just some calming things, breathing, and on a regular day of the week?

- I would prefer to see more healthier [programming].
- I would like to see some more programming — as to what that would be, I don't know.
- One of the ideas I would like to do is a cultural focus, and not specifically Aboriginal, but touch on Irish background, Aboriginal background, etc. I want to do a celebration of who they are as people — their foods, their activities, the cultural side of things.
- The people here certainly help consumers make appointments or get to the hospital, and I think there could be more of that sort of thing from individuals.

Improving the Physical Space

- [Crocus] could probably be cleaner I would say — better janitorial — the bathrooms are not bad but the floors and stuff like that.

Partnership Development

Partnership Development with Organizations That Work with Mental Health Consumers

- I think there is more work that is required. I don't think there is enough knowledge in the community about the nature of Crocus. [Crocus needs to be] developing better relationships with our partners — more active relationships perhaps.
- I imagine that's there and if it's not, that is something we should look at. But I would like to see the connections better because when I was on the board we didn't have a big connection with the CMHA.
- People who work in the community (community health nurses and social workers) need to be referring to Crocus. They need to be thinking of Crocus as an option. And by that I mean to take them down and introduce them — “Hello, this is ...”
- I would invite somebody from the CMHA to come down to Crocus and once a week, or two or three times a week, do an outreach program at Crocus.
- Linkages to bring more members in is one of the challenges that I never seem to have enough time to do. We should be bridging with White Buffalo and with Core Neighbourhood Youth Co-op. We need to do better linkages. Yeah, we're missing a lot of people that we need to help. Part of it is the Aboriginal population and part of it is the uninformed population that has no idea about what kind of services are out there. We spend a lot of time building awareness, and things have improved, but we have a long way to go.

- I think there could be stronger connections between [Crocus] here and the Mental Health Association as far as the work program goes.
- Things to do better — work on the relationships with other organizations whether they be mental health organizations or co-ops — just outside connections — because that helps to promote who we are and what we are.

Partnership Development with Other Co-operatives

- Build a better relationship with other co-operatives that we could do things with — the Community Clinic, for example. I don't think we have as strong a relationship as we should.
- There is so much connection with a co-op; you can get so much more help from the co-ops. They help each other and do things for each other, and we haven't pulled on that a lot. If you are a co-op, you are part of a family; you can go to another family and say, "We need some help in this area; could you give us a hand?" And you can go there and it might be a grocery store. Maybe we want to set up an account at the co-op for the kitchen, and maybe we want to get a discount. We're a co-op, what can you do for us? Can you do anything better than the average?

Education and Raising Awareness

Educating the Community and Policy Makers about Mental Health

- Better understanding of mental health issues in the community — it needs to be addressed. It needs to be communicated to the community at a higher level. We need some promotion at a higher level — at the city level, at the provincial level, at the government level. Nobody is taking care of [Crocus].
- If we are not poking these guys [the government] and telling them, people don't understand what is going on with mental health.

Educating the Community about Crocus

- If there was a video program, or someone like the CEO, [who] would [give] a half-hour or twenty-minute talk on TV saying what Crocus is all about and let people know that it is a place for people who suffer from mental health issues. A lot of it is just word of mouth and that's good, but I think we need more than just word of mouth.
- Do people know what Crocus does for the mental health community?
- We are still "the best kept secret in Saskatoon." A lot of people don't know about

Crocus, and if they do, will still ask the question, “What do you do down there?” So that is still a big area that needs to be expanded.

- It would be nice in the new building if we could also incorporate, and do shared programming, but it would also be nice to bring in the general public sometimes. It would be sort of fun if our kitchen could expand and have a two-tiered cost for our kitchen and cook more meals so that “Joe Public” would pay \$5, where our members pay \$3. So by doing that, bring more people in to see what we do here.
- The outside community doesn’t know (about us) until they have an experience or they have a need, so that is steadily growing.

Education about the Co-operative Model

- I don’t think people [the consumers] understand co-ops. [One of the past executive directors] used to give co-op speeches about how we’re all in this together, and I don’t hear the speeches anymore.

More Funding

- Money for staffing — we’ve come from being one person to five people, but it’s still not enough.
- It would be nice not to have to worry about that budget side. If we had money we could do bigger trips within the city and the surrounding area.

Board of Directors

Board Recruitment

- You have to have fresh people on the board from the community side because if you don’t see what’s happening in the community, or which way trends are going for mental health, or what works and what doesn’t, then you keep on doing things the same old way, right?

Board Training

- Some members don’t have a clue what’s going on. We don’t do a good job. They didn’t do a good job when I was on the board. We did have some board training. I think we should be developing leadership among our members — to put it that way.

Volunteer Co-ordination

- We have all kinds of baby boomers who are retiring and looking for things to do — meaningful things. So maybe they need a co-ordinator of volunteers, a community relations volunteer.

Increasing Membership

- So to continue to grow — our membership is increasing and I'm hoping that will continue to grow. [We need to] increase our programming and get more people in the door and grow mental health in the global community.

Management and Human Resources

- Has [the social program] even been managed well? Not really. It's really been kind of looked after by the staff collectively and by the volunteers.
- It is the reality that if Crocus is going to survive for one hundred years, we have to be smarter at how we do business.
- The biggest challenge right at this moment is staffing. Ensuring the staff is functioning efficiently, that's a huge challenge here because we've grown. Our needs and tasks are always changing, so we need to be more efficient with everything we're doing right now.

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