

The background features a vibrant, abstract composition. On the left, a large cyan shape contains a circular pattern of black dashes. To its right is a white area with a fine black dot pattern. Further right, a large brown shape contains a circular pattern of white dots. On the far right, a magenta shape is partially visible. The bottom of the image is dominated by a light pink shape with a white cross pattern. Scattered throughout are small, black, wavy lines.

# Facilitating Use of Evaluation Findings: Sharing What? With Whom? And How?

Chelsea Jalloh (she/her), PhD

June 11, 2026

Summer Institute



**Margaret Ormond**  
Former Executive Director  
Sunshine House



**What were some of the key take-aways of your readings that relate to “use” of evaluation findings”?**

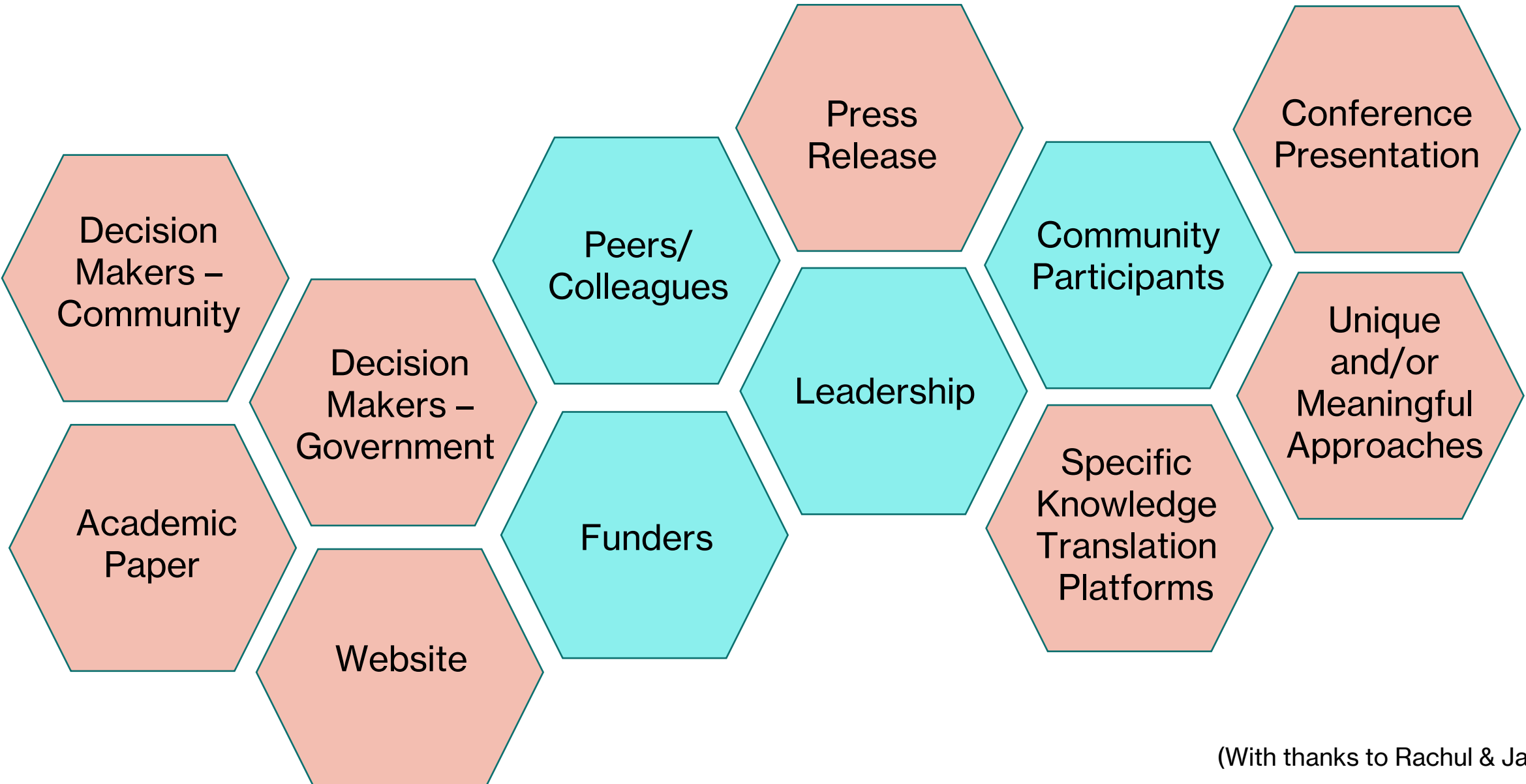


A wooden sign on an easel with the text "WHAT DO YOU THINK?" in bold black letters. The sign is white with a wood-grain texture and is mounted on a light-colored wooden easel. The background is a solid blue color.

**WHAT  
DO YOU  
THINK?**

**Recognizing each evaluation is unique, who are some people/groups who could or should know about the evaluation results?**

# Who could/should know?



**How could/should program evaluation results be communicated?**

**What are some considerations when determining how and in what ways program evaluation results are shared?**



# **Consider:**

**Who are the different audiences who should receive the program evaluation results?**

**How will the different audiences use the information?**

**What would be an effective strategy to communicate the program evaluation results to this particular audience for this particular purpose?**

# Consider:



**Tailor your approaches!  
This is not one-size-fits-all**

**Who are the different audiences who should receive the program evaluation results?**

**How will the different audiences use the information?**

**What would be an effective strategy to communicate the program evaluation results to this particular audience for this particular purpose?**

# Manito Ikwe Kagiikwe-Mothering Project



- Program launched at Mount Carmel Clinic in 2013
- Evaluation in 2014/2015


(image from: <https://www.mountcarmel.ca/how-we-help/early-learning-parenting/>)

(With thanks to Rachul & Jalloh, 2023)

# Manito Ikwe Kagiikwe-Mothering Project



## WOMENS ADVISORY COUNCIL OF MANITO IKWE KAGIIKWE



THE WOMENS ADVISORY COUNCIL IS THE ADVISORY BODY, GUIDING COMPASS, AND KNOWLEDGE KEEPING ORGANIZATION OF THE MOTHERING PROJECT AT MOUNT CARMEL CLINIC. THE MOTHERING PROJECT SUPPORTS WOMEN WHO ARE PREGNANT AND DEAL WITH SUBSTANCE USE. WE ARE THE HEART AND SPIRIT OF THE PROGRAM. WE GATHER REGULARLY TO MAKE DECISIONS ABOUT THE PROGRAM, DETERMINE DIRECTION AND PRIORITIES, AND SHARE OUR INSIGHTS TO HELP THE PROGRAM SERVE WOMEN AND THE COMMUNITY.

THE WOMENS ADVISORY COUNCIL HONOURS THE TRADITIONAL NAME GIVEN TO THE MOTHERING PROJECT: MANITO IKWE KAGIIKWE, BY CARRYING THE TEACHINGS OF THIS NAME FORWARD IN OUR WORK.



### OUR WORK IS LED BY OUR GOALS TO:

BUILD COMMUNITY  
CONNECTION

MEET WOMEN  
WHERE THEY ARE AT  
WITHOUT JUDGMENT

KEEP FAMILIES  
TOGETHER

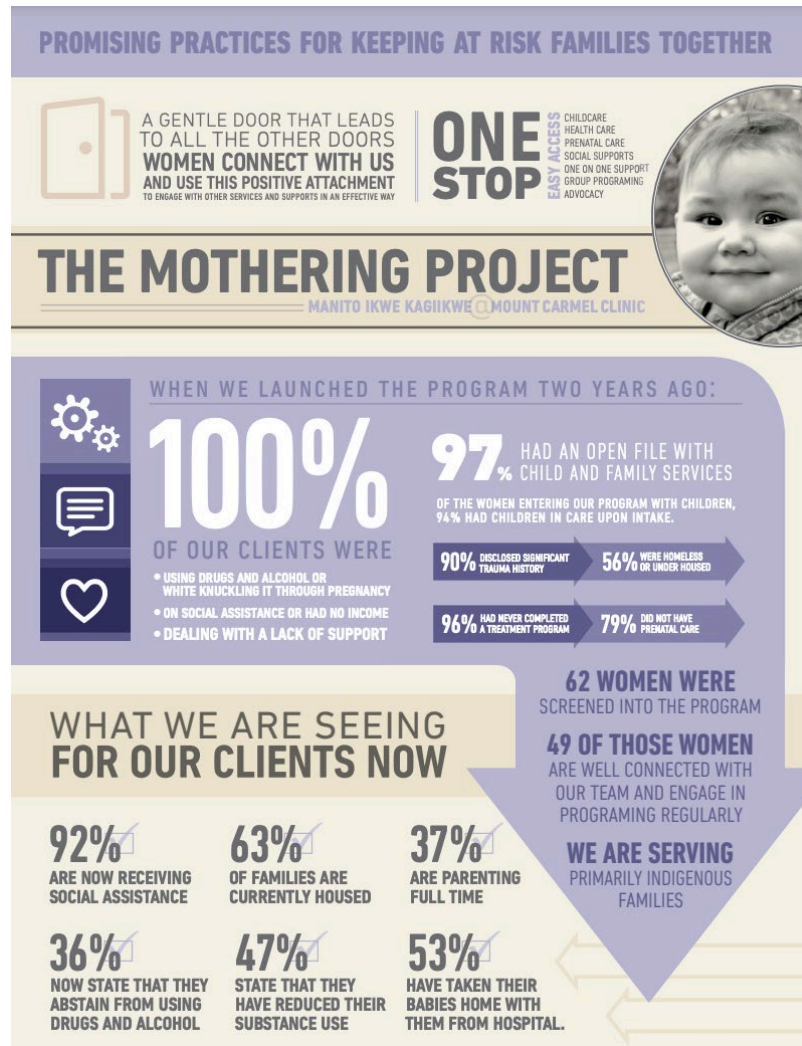
HONOR TRADITIONAL  
KNOWLEDGE AND  
EXPERIENCE

SUPPORT AND  
EMPOWER EACH  
OTHER

USE OUR EXPERIENCE  
TO CREATE CHANGE



# Infographic



# Media & Organizations



## The Mothering Project aims to break cycle of addiction

Innovative program in Winnipeg's North End offers non-judgmental prenatal care

By Laura Glowacki, CBC News | Posted: Apr 28, 2015 5:00 AM CT | Last Updated: Apr 28, 2015 6:39 AM CT

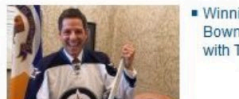


Stephanie Wesley, left, her daughter and Margaret Bryans meet up at Winnipeg's Mothering Project for a conversation with Marcy Markusa of CBC's Information Radio. (Marcy Markusa/CBC)

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Latest Manitoba News Headl



- Winnipeg homeless homicides: P of interest 17
- Winnipeg basks in summer-like w
- Winnipeg woman warns financially homeowners about man offering h
- National conference on homeless Winnipeg



December 21, 2015

## Mothering Project : effective prevention with vulnerable families

"The root causes of neglect—including poverty, poor housing, food insecurity, and substance abuse—lie beyond the scope of the child welfare system to resolve. But a collaborative approach, working with parents and harnessing the collective resources of child welfare and other provincial government departments, other levels of government, and the province's many community-based organizations, can make a difference for vulnerable families." Honourable Ted Hughes, 2014

cultural barriers so these pregnant and parenting women can access addiction support, trauma counseling, prenatal, obstetric, nutritional and medical care, as well as parenting and child development supports. The emotional welfare of participants is also fostered with childcare, social supports, one-on-one support, group programming and advocacy. By being community-based, it also offers a safe culturally grounded and trauma informed environment where the women can build relationships with each other and with a caring staff.

These words from the findings of the Inquiry into the tragic death of Phoenix Sinclair stressed again the need to create comprehensive, preventive measures that support vulnerable families.

The Mothering Project (Manito Ikwé Kagiikwe) is such a measure; an innovative community-based program providing services to vulnerable mothers impacted by substance use, mothers who are at greater risk of having their children apprehended by child welfare authorities. Based on an understanding of the negative long-term health outcomes that apprehension has for mother and child, this program provides comprehensive, prevention-focused and non-judgmental services to this chronically underserved population.

What makes this program unique is that participants are not required to stop their substance use to receive services. By destigmatizing addiction, the Mothering Project removes social, economic and

This innovative approach is consistent with research that shows substance-using mothers who have access to a community network of supports and services can have good quality parent-child relationships, a crucial determinant of child health. The Mothering Project is already seeing many successes, largely because of its focus on prevention, harm reduction and building on family strengths.

Building on the experiences of the Sheway Program (Vancouver) and the Breaking the Cycle Program (Toronto), the Mothering Project started in 2013 by Mount Carmel Clinic under the direction of two advisory groups. Its design and implementation are also consistent with the findings of The Phoenix Sinclair Inquiry that highlighted the need for the child welfare system, government and community to share responsibility for protecting children.

there is an alternative.

CCPA-MB  
205-765 Main St.  
Winnipeg, MB  
R2W 3N5

phone  
(204) 927-3200  
email  
ccpamb@policyalternatives.ca  
website  
www.policyalternatives.ca/manitoba  
blog  
www.policyfix.ca  
twitter  
@ccpamb

<https://www.cbc.ca/news/canada/manitoba/the-mothering-project-aims-to-break-cycle-of-addiction-1.3048235>

[https://policyalternatives.ca/sites/default/files/uploads/publications/Manitoba%20Office/2015/12/Mothering\\_Project.pdf](https://policyalternatives.ca/sites/default/files/uploads/publications/Manitoba%20Office/2015/12/Mothering_Project.pdf)

(With thanks to Rachul & Jalloh, 2023)

# Social Media



@CEWHca   



@CanFASD  

## Girls, Women, Alcohol, and Pregnancy

PERSPECTIVES ON FASD PREVENTION

[ABORIGINAL/INDIGENOUS](#) / [CHILD WELFARE](#) / [HARM REDUCTION](#) / [PERINATAL SUPPORT](#) / [PRENATAL SUPPORT](#) / [SOCIAL DETERMINANTS OF HEALTH](#) / [SUBSTANCE USE](#) / [TRAUMA](#)

The Mothering Project/Manito Ikwe Kagiikwe in  
Winnipeg, Manitoba

© MAY 1, 2015  FASD NAT  1 COMMENT

The program is a wonderful example of a integrated and holistic pregnancy program for women with addiction and related concerns. The program is based on principles of harm reduction. (Learn more about harm reduction and similar programs in this booklet, [Harm Reduction and Pregnancy: Community-based Approaches to Prenatal Substance Use in Western Canada](#)).

Since the program opened two years ago, 49 women have participated. Early evaluation findings show that, at the beginning of the program, 100% of women were actively using substances, 97% had never completed a substance use treatment program and 56% did not have a prenatal health care provider. Over the course of the program, 36% stopped using alcohol and drugs, 47% reduced their use, 39% attended an addiction treatment facility and 100% accessed prenatal care. Over half of mothers have been able to take their babies home with them from the hospital. Check out the [infographic](#) below for more.

(With thanks to Rachul & Jalloh, 2023)

# Application & Advocacy

## News Release - Manitoba

June 23, 2020

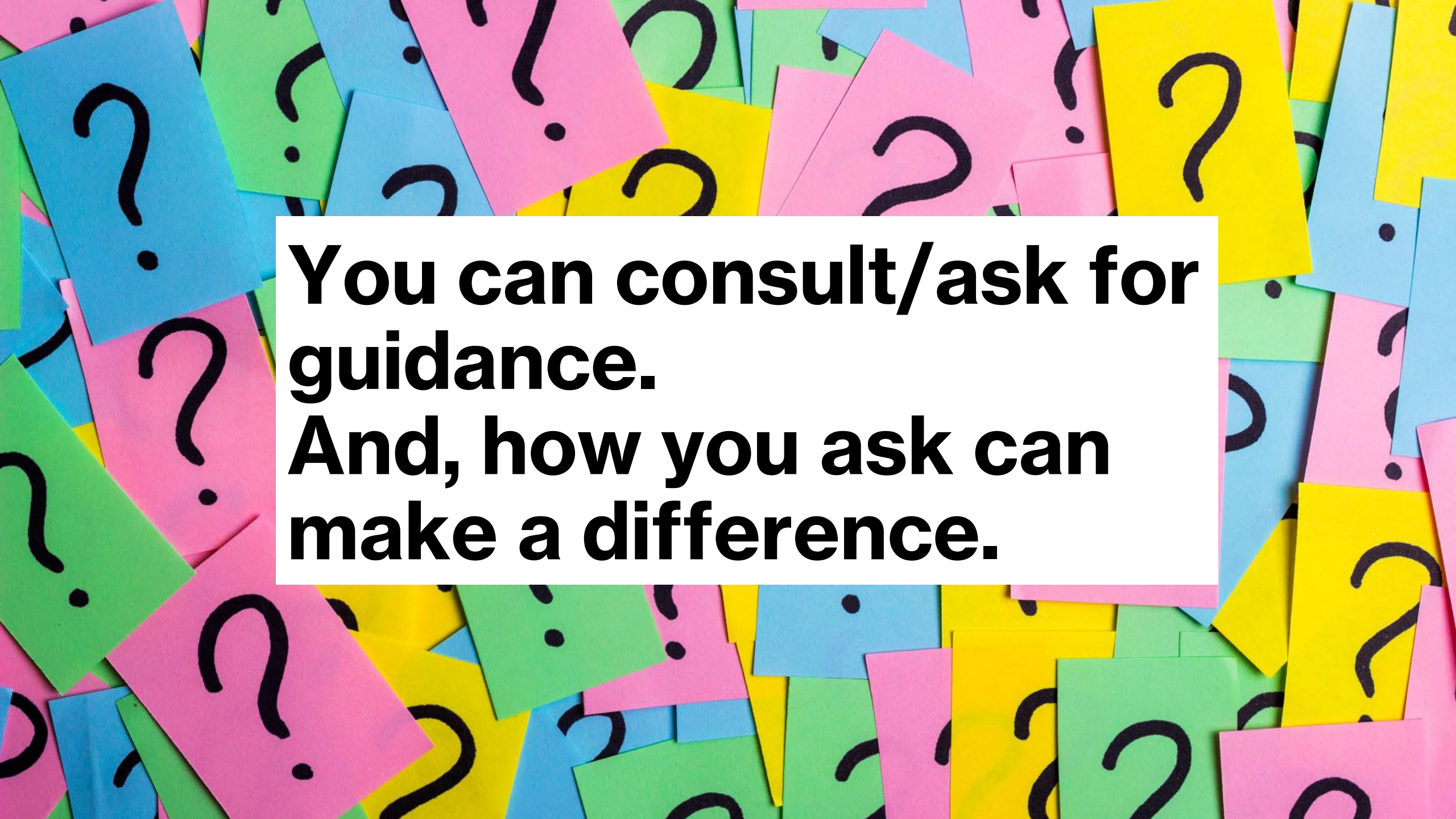


Families Minister Heather Stefanson (far left) announced nearly \$400,000 to support the expansion of The Mothering Project at Mount Carmel Clinic and the end of birth alerts as of July 1. She was joined by (left to right) Mount Carmel Clinic executive director Bobbette Shoffner, Elder Mae Louise Campbell and MLA Janice Morley-Lecomte.

- Government of Manitoba invested nearly \$400,000 to double the capacity of the Mothering Project (Manito Ikwe Kagiikwe)
- "A 2015 evaluation found the Mothering Project had reduced the number of children entering care, increased access to health-care services and reduced substance use."



**Be creative!**



**You can consult/ask for  
guidance.  
And, how you ask can  
make a difference.**

# Vision board created by Peers to represent their experience throughout the project



# Interactive Q&As

## Cystic Fibrosis Canada – Manitoba Chapter



**Balancing variables  
like:  
Time,  
aspirations/ideas,  
values,  
resources,  
structures ...**



# Small Group Activity

You are a new addition to an evaluation team who has recently completed a program evaluation in one of the following contexts:

1. A newly developed breakfast program to address food security within elementary schools in a particular school district
2. A pilot physical activity program to support older adults engaging in maintaining/enhancing physical mobility in an assisted-living centre
3. A needs-assessment for a supervised consumption site in Brandon (which you are advocating for; does not currently exist)
4. A well-established (over 5 years) family resource centre to explore if services are meeting the needs of people who access the centre/service-users' experiences
5. An evaluation of existing services, and gaps in services, to provide mental health services and supports for youth in Northern communities for a regional health authority

# Small Group Activity



In your small group, discuss one of the scenarios. The primary focus of this activity is on sharing the evaluation results.

## **Discuss:**

\*Who are some of the primary audiences you will share these results with? For each, how will they use these results?

\*What approaches to sharing these results might you implement? What are considerations you will think about in developing these approaches?

# Some Considerations: Use of Images

Over the past fiscal year, the number of families accessing services at the Willowdale Community Resource Centre increased by 16%. While the number of people accessing services increased across the board, the number of families accessing the food bank increased by 30%. In particular, there were increased requests for halal and gluten-free food options.



# Some Considerations: Use of Images

Over the past fiscal year, the number of families accessing services at the Willowdale Community Resource Centre increased by 16%. While the number of people accessing services increased across the board, the number of families accessing the food bank increased by 30%. In particular, there were increased requests for halal and gluten-free food options.



# Some Considerations: Use of Images



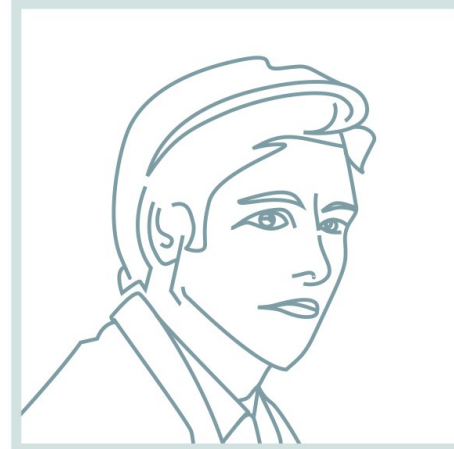
Representation is not a “yes” or “no” – it’s also “how”.  
What are the implications of how different identities/  
experiences are represented?

# REPRESENTATIVE IMAGES: PNEH



- Direct gaze
- Appears prepared for photo (posed)
- Well-groomed/ business casual attire
- Close camera shot (torso and above)

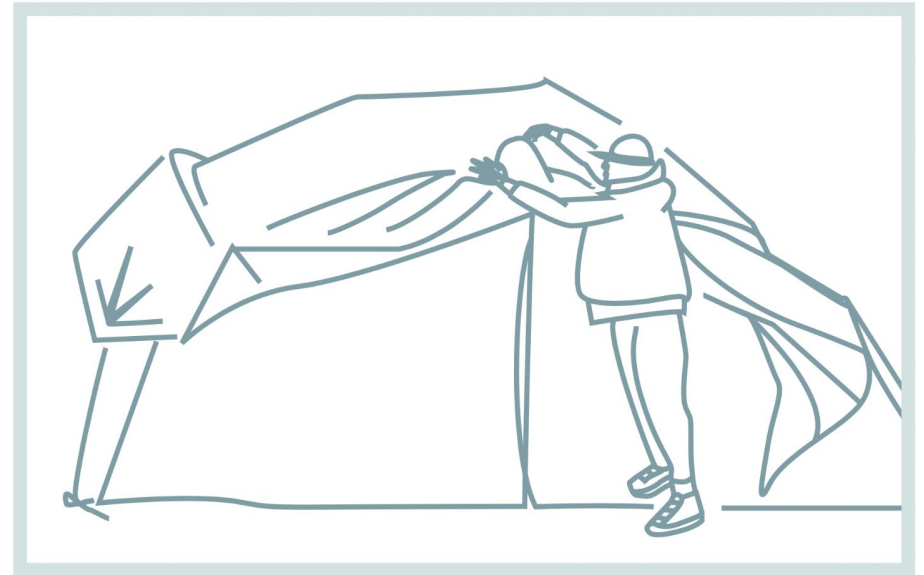
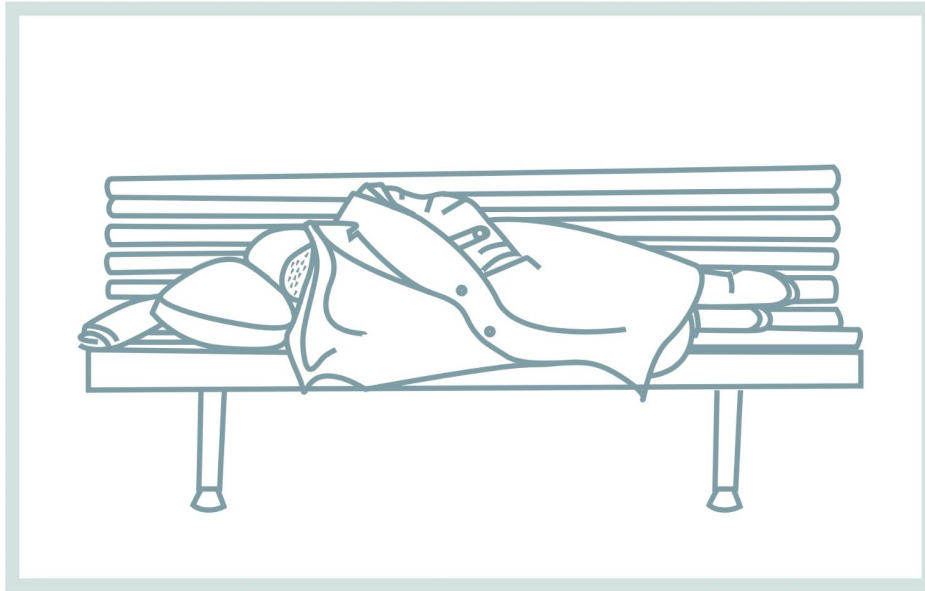
Senior Community  
Organization Staff



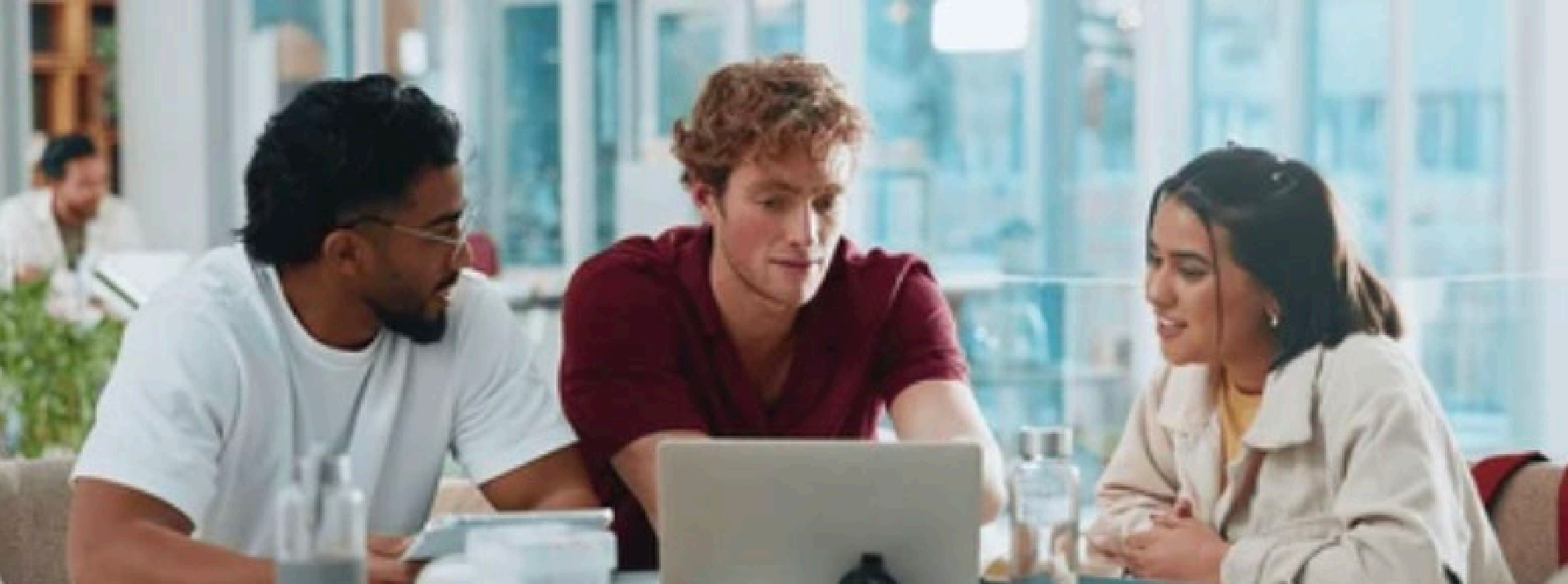
Politician

- Indirect gaze
- In an environment where photos would be expected (e.g., press conference)
- Well-groomed/ business attire
- Close camera shot (torso and above)
- Often action shot (e.g., while speaking)

# REPRESENTATIVE IMAGES: PEH



- Indirect gaze
- Longer distance of camera shot (e.g., across the street)
- Less clear if the subject was aware of being photographed (e.g., unposed, sleeping)
- In some cases, subjects were engaged in activities (e.g., arranging their belongings)



## **Some Considerations: Language**

- For a general audience, aim for between a 7-9 grade reading level
- Watch for excessive acronyms/jargon
- Flesch Kincaid Grade Level

# SERC (Sexuality Education Resource Centre)

**This resource is available as free, downloadable PDFs:**

[Sexual Health in Canada Amharic Version](#) PDF

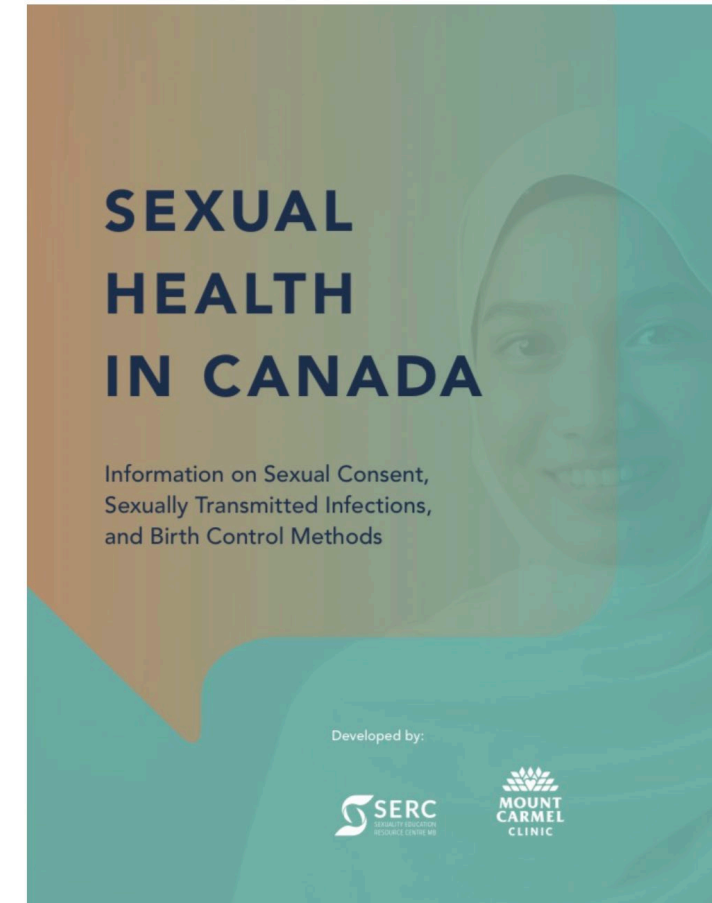
[Sexual Health in Canada Arabic Version](#) PDF

[Sexual Health in Canada English Version](#) PDF

[Sexual Health in Canada Somali Version](#) PDF

[Sexual Health in Canada Swahili Version](#) PDF

[Sexual Health in Canada Tigrinya Version](#) PDF



# What's the difference (and does it matter) ?

Ongoing programming will be informed by participants....

Ongoing Programming will be informed by, and accountable to, participants ....





**Thanks very much for your time and engagement!**

**[Chelsea.Jalloh@umanitoba.ca](mailto:Chelsea.Jalloh@umanitoba.ca)**

# References

Jalloh, C. (2022). *“At risk” and “a risk”*: A critical discourse analysis of government and media texts exploring framings of, and responses to, people experiencing homelessness in the context of COVID-19 . [Doctoral dissertation, University of Manitoba]. <http://hdl.handle.net/1993/36207>

Jalloh, C., Illsley, S., Wylie, J., Migliardi, P., Stewart, D., West, E., & Mignone, J. (2017). What goes around: The process of building a community-based harm reduction research project. *Progress in Community Health Partnerships: Research, Education and Action*, 14(73), 1-8. DOI: 10.1186/s12954-017-0199-1


Rachul, C. & Jalloh, C. (2023, March 17). *Getting Started With Program Evaluation*. Workshop presented for the Public Health Preventive Medicine Residents, University of Manitoba. Office of Innovation and Scholarship in Medical Education.

References/links related to The Mothering Project Manito Ikwe Kagiikwe are provided on their respective slides.

# Results re: Evaluation of a Service Learning Education Program

**Quality Assurance**

**Undergraduate Medical Education Service Learning: Summary of Community Organization Feedback**



**University of Manitoba**

**INTRODUCTION & BACKGROUND:**

In 2016, Service Learning became a required part of the curriculum for undergraduate medical students in the Max Rady College of Medicine at the University of Manitoba. Since that time, regular feedback has been collected from students to inform and improve the Service Learning educational experience. In addition to student feedback, it is important to seek feedback from community organizations involved in Service Learning. All organizations involved with Service Learning during the 2018/2019 academic year were invited to share their feedback via an online survey (or a phone conversation, if they preferred). While many of the contacts at these organizations regularly provide informal feedback to the Office of Community Engagement, this survey aimed to collect systematic feedback from community partners involved with Service Learning. Making sure the University has processes in place to obtain feedback from community organizations is an important part of strengthening reciprocal, working relationships between the university and community organizations, and a way to improve the Service Learning experience for both students and community partners.

**WHAT WE DID:**

In June 2019, The Office of Community Engagement emailed a brief survey to 36 organizations to seek feedback about their experiences with Service Learning students. Participation in the survey was voluntary and organizations who participated could choose to share, or not share, the name of their organization. In total, 27 organizations completed the survey.

**WHAT WE HEARD FROM ORGANIZATIONS:**

**THEME 1: LOGISTICS**

This feedback addressed topics such as matching students with organizations, scheduling times for students to complete their Service Learning hours, and the organization's communication with students and with the university. Overall, the responses from community organizations were positive.

- 92% of respondents indicated they were satisfied with the process of matching students with organizations.
- 52% of organizations indicated it was "easy" to schedule students for their Service Learning.
- 15% said it was "somewhat difficult" to schedule with students.
- 33% indicated that scheduling with students was "somewhat easy".

**Canadian Medical Education Journal** *Brief Reports*

**Community organization feedback about an undergraduate medical education service learning program**  
**Rétroaction d'un organisme communautaire sur apprentissage en milieu de travail d'un programme d'études médicales de premier cycle**

*Roger Berrington,<sup>1</sup> Nina Condo,<sup>2</sup> Felicien Rubayita,<sup>3</sup> Karen Cook,<sup>4</sup> Chelsea Jallah<sup>4</sup>*

<sup>1</sup>CanU, Manitoba, Canada; <sup>2</sup>Elmwood Community Resource Centre, Manitoba, Canada; <sup>3</sup>Manitoba Interfaith Immigration Council (Welcome Place), Manitoba, Canada; <sup>4</sup>Department of Community Health Sciences, Rady Faculty of Health Sciences, University of Manitoba, Manitoba, Canada

Correspondence to: Chelsea Jallah, 5113-750 Bannatyne Avenue Winnipeg, Manitoba, University of Manitoba, Rady Faculty of Health Sciences, Max Rady College of Medicine, Department of Community Health Sciences R3E 0W3, email: [Chelsea.Jallah@umanitoba.ca](mailto:Chelsea.Jallah@umanitoba.ca)

Published ahead of issue: June 14, 2021; published: September 14, 2021; CMEJ 2021, 12(4). Available at <http://www.cmej.ca>

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<https://doi.org/10.36834/cmej.71420>. This is an Open Journal Systems article distributed under the terms of the Creative Commons Attribution License. (<https://creativecommons.org/licenses/by-nc-nd/4.0/>) which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is cited.

**Abstract**

**Background:** In 2016, Service Learning (SL) became a curricular requirement for undergraduate medical education (UGME) students at the University of Manitoba. Students partner with a community-based organization for two years to engage in non-clinical activities in community settings. Significant feedback has been collected from students re: their SL experiences. This project specifically collected feedback from community organizations involved with SL.

**Methods:** In June 2019, an electronic survey was distributed to the 36 community organizations involved with SL.

**Results:** Twenty-seven organizations completed the survey. Feedback was grouped into two main themes: 1) Logistics and 2) The SL Experience. About half (52%) of respondents indicated it was "easy" to schedule students for SL; however, students' busy schedules and differences between hours of organization programming and students' availability were highlighted. Most respondents described students as "engaged" (70%); respondents indicated SL raised students' understanding of power and privilege (56%) and systemic oppression (63%).

**Conclusions:** Community organizations shared valuable insights to inform the SL program. Results identified specific aspects of the SL program to address moving forward, such as sharing learning objectives with community partners. Ensuring processes are in place to obtain feedback from community partners is an essential step to improve SL programs, and to strengthen reciprocal community-university partnerships.

**Résumé**

**Contexte :** Depuis 2016, l'apprentissage par le service (AS) est une des exigences du programme d'études pour les étudiants en médecine de premier cycle à l'Université du Manitoba. Dans ce cadre, les étudiants participent à des activités non cliniques en collaboration avec un organisme communautaire. De nombreux commentaires ont déjà été recueillis auprès des étudiants sur leur expérience d'AS. Dans le cadre de ce projet, nous avons sollicité une rétroaction des organismes communautaires participant au programme.

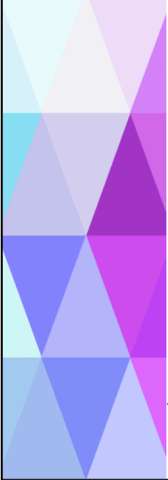
**Méthodes :** En juin 2019, un sondage en ligne a été distribué aux 36 organismes communautaires participant à l'AS.

**Résultats :** Vingt-sept organismes ont répondu au sondage. Les commentaires ont été regroupés en deux thèmes principaux : 1) la logistique et 2) l'expérience de l'AS. Environ la moitié (52%) des répondants ont indiqué qu'il était « facile » de recruter des étudiants; toutefois, ils ont souligné l'horaire chargé de ces derniers et le décalage entre l'horaire des activités des organismes et la disponibilité des étudiants. La plupart des répondants ont décrit les étudiants comme étant « engagés » (70 %); les répondants ont indiqué que l'AS a permis de sensibiliser les étudiants aux problèmes de pouvoir et de privilège (56 %) ainsi qu'à l'oppression systémique (63 %).

**Conclusions :** Les commentaires des organismes communautaires ont été très utiles aux responsables du programme d'AS. Les résultats ont mis en évidence des aspects à travailler, comme le partage des objectifs d'apprentissage avec les partenaires communautaires. La mise en place de processus permettant d'obtenir la rétroaction des partenaires communautaires est une étape essentielle à l'amélioration des programmes d'AS et au renforcement des partenariats entre la communauté et l'université.

70

# Phase 2: Application



## Deconstructing and Reconstructing: Revising Service Learning Objectives in Dialogue with Community Partners

CIC COMMITTEE APRIL 3, 2023



## Deconstructing and Reconstructing: Revising Service Learning Objectives in Dialogue with Community Co-Educators

**Working Group Members:** *Barbara Borges* (Department of Community Health Sciences Undergraduate Medical Education Program, University of Manitoba); *Karen Cook* (Office of Community Engagement, University of Manitoba); *Chelsea Jalloh* (Office of Innovation and Scholarship in Medical Education, University of Manitoba); *Angeline Nelson* (Wii Chiwaakanak, University of Winnipeg); *Liam Fullerton* (Winnipeg Interprofessional Student-Run Health Clinic); *Prasansa Subedi* (Undergraduate Medical Student, University of Manitoba); *Harman Vats* (Undergraduate Medical Student, University of Manitoba); *Britney Wilson* (CanU)

Service Learning (SL) became a curricular requirement for pre-clerkship undergraduate medical students at the University of Manitoba in 2016. During SL, students partner longitudinally with a community co-educator (e.g., community-based organization), to complete required hours, and engage in structured critical reflection. In 2019, community co-educators provided formal feedback about the program; this feedback highlighted that though the SL program is delivered in partnership with community co-educators, the SL program's learning objectives were developed exclusively by university staff<sup>1</sup>.



Drawing from Mitchell's definition of critical service learning<sup>2</sup>, a working group was struck to reimagine the SL program's learning objectives in dialogue with community co-educators. The working group was comprised of medical students (n=2), community co-educators (n=3), and university staff (n=3). With a Scholarship of Teaching and Learning Grant from the University of Manitoba, the working group facilitated three online community co-educator "listening groups" in May 2022 to explore the purpose of SL for medical students and community organizations, and the foci and language of the objectives. Thirteen community co-educators from 10 organizations shared their insights in the listening groups. Following data analysis, the working group developed three revised SL learning objectives to implement in fall 2023.

This project provided a meaningful opportunity to critically reflect on the relational power dynamics underpinning the SL educational program. Co-constructing the SL program's learning objectives challenged the status quo that often privileges institutional priorities. Instead, this initiative provided an opportunity to deconstruct and reconstruct the SL educational objectives in more equitable and collaborative way. In this way, we seek to involve the community not only as a geographic location in which learning can take place, but to involve community members as valued co-constructors and co-leaders of the SL program. In so doing, we hope to model an innovative possibility for interprofessional collaboration—to invite students to reflect not only on their power as medical students/future physicians, but also to reflect on the implications of institutional power and authority when seeking out community engagement and collaboration—one of the hallmarks of social accountability in medicine.



### References:

1. Berrington, R., Condo, N., Rubayita, F., Cook, K., & Jalloh, C. (2021). Community organization feedback about an undergraduate medical education service learning program. *Canadian Medical Education Journal*, 12(4), 70-78. <https://doi.org/10.36834/cmej.71420>
2. Mitchell, T. D. (2008). Traditional vs. critical service-learning: Engaging the literature to differentiate two models. *Michigan Journal of Community Service Learning*, 14, 50-65. <http://hdl.handle.net/2027/spo.3239521.0014.205>

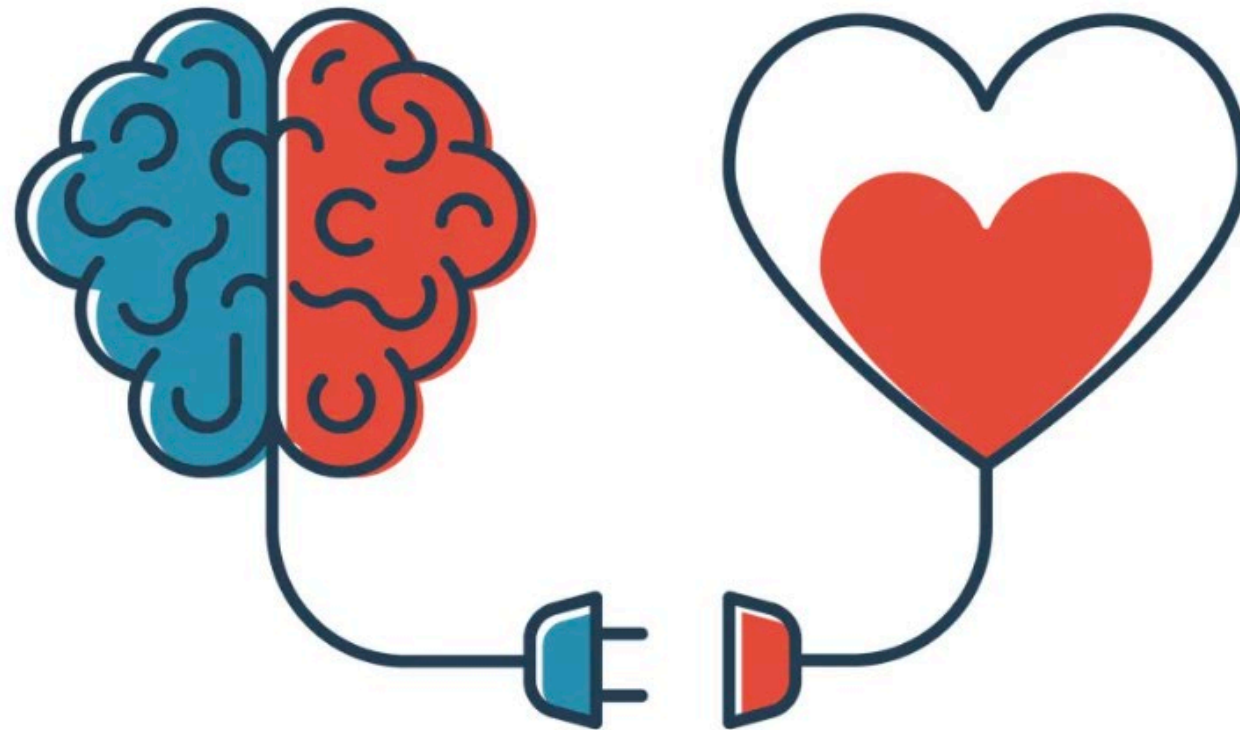
# Influencing System Change....



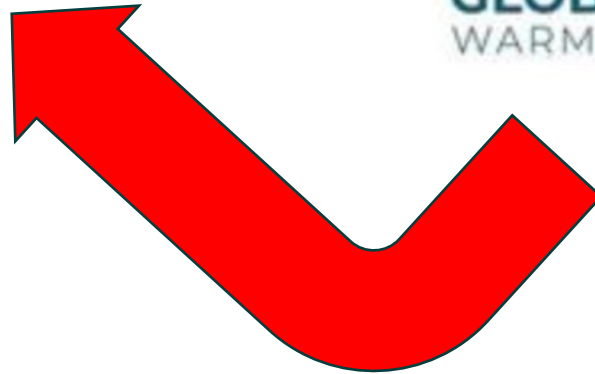
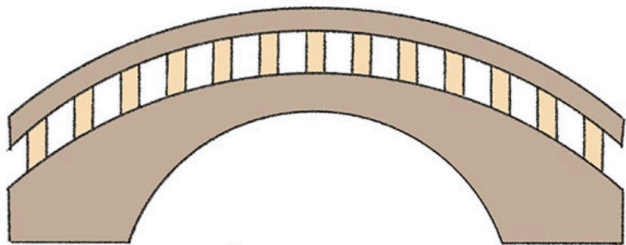
## 2026 Registration Rates

Registration Category	Early Bird Rate (Ends Feb 28)	Regular Rate
Full Congress Registrant	\$ 1,495	\$ 1,695
Researcher (non-clinicians)	\$ 795	\$ 995
Administrative Staff	\$ 795	\$ 995
Learner	\$ 175	\$ 375
Community Member	\$ 175	\$ 375
Patient Partners	\$ 175	\$ 175
Gairdner Keynote ONLY	\$ 100	\$ 100
One Day Congress Registrant	\$ 550	\$ 550

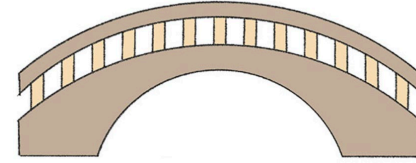
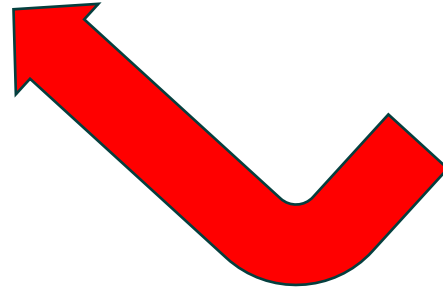
# Connecting Head to Heart



# An Example: My Journey Caring About Planetary Health

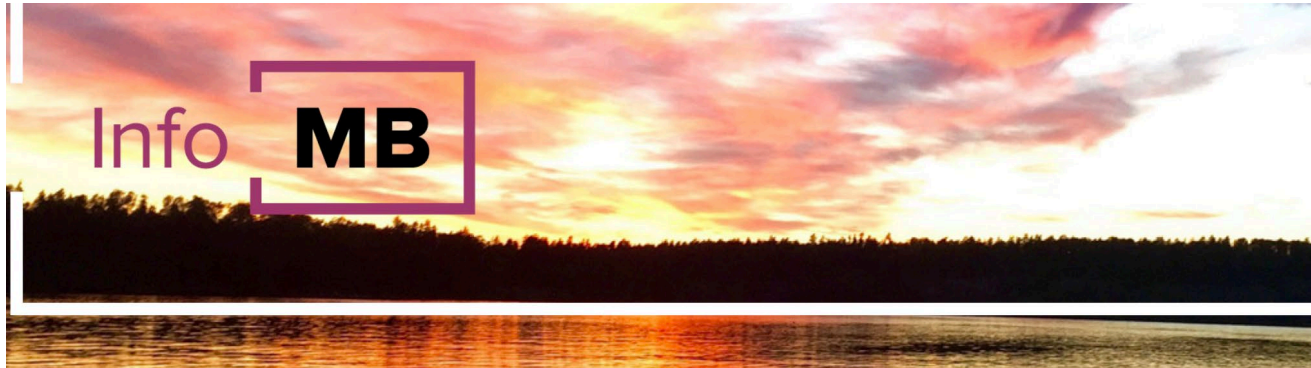


# How to build the



- Elected official – mandate letter/directive
- Strategic Plan
- Mission statement/vision
- Accreditation Standard
- Annual General Report
- Something in the news
- Official platform/priority areas/speaking points
- Strong existing views you can tap into

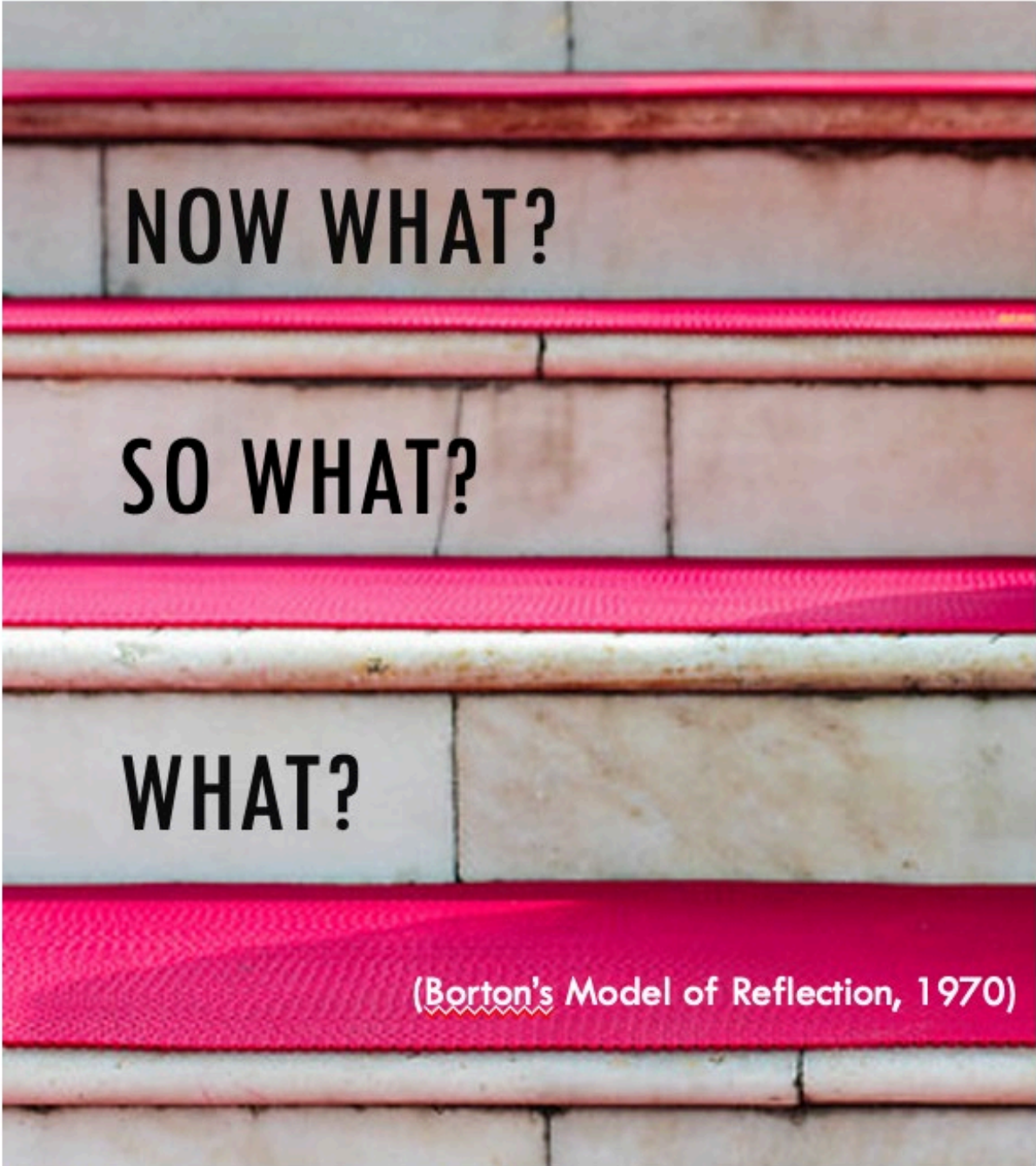
# Mandate letters can be very useful



Manitoba.ca > OpenMB > InfoMB

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<https://www.gov.mb.ca/openmb/infomb/ministerials.html>

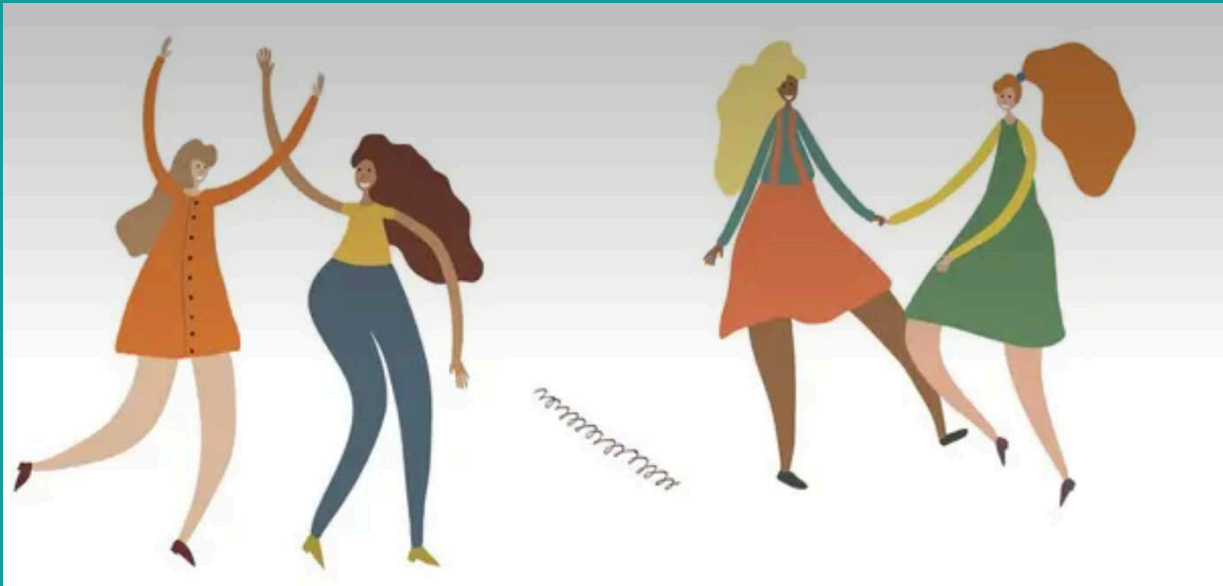


**NOW WHAT?**

**SO WHAT?**

**WHAT?**

**(Borton's Model of Reflection, 1970)**



Advocacy can be a bit of a dance.

You need to decide what information you will **LEAD** with, and your approach might change depending on who you are dancing with.



# COULD YOU HELP ME PLANT MY GARDEN?



- Gardens are so good for the bees! This will benefit the environment.
- We could spend quality some time together outside enjoying the beautiful weather.
- I am inspired by how beautiful your garden is and would love to learn from you.
- We will get this garden done as quickly as possible and then I will take you for drinks on a patio.
- I helped you move so you definitely owe me a favour!

# DANCING WITH: PROGRESSIVE CONSERVATIVES

- “Fighting for all Manitobans”
- Emphasis on making “life affordable”; “helping Manitobans make ends meet.”
- “Creating good jobs”/”economically prosperous”
- Focus on “healing the healthcare system”
- Excited for ”bright opportunities”/”bright futures” ahead



# DANCING WITH: NDP

- Responsive/Solution Focused: “We need a government that fixes problems instead of making things worse.”
- Fighting to “stop the cuts” – especially in health care
- “Fighting for the things you care about”
- “Fighting for a brighter future for you and your family”



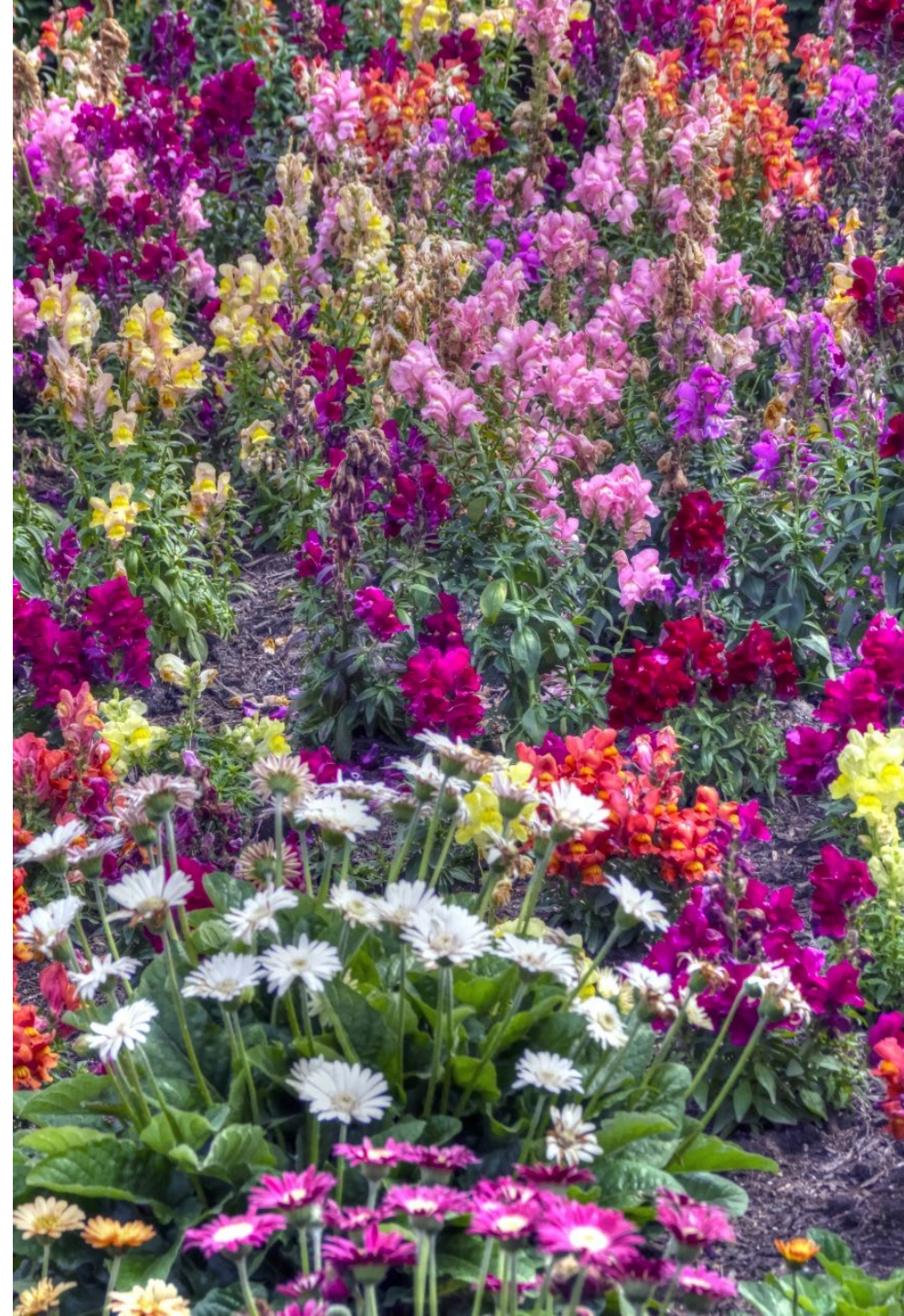
# DANCING WITH: LIBERALS

- Results/Outcomes Driven (“Manitoba Liberals get results”; “We’ve changed lives for the better”)
- “Improving people's lives is why we stand to serve in public office”; “We’re always fighting for you”
- “We've brought critical, constructive and firm opposition to this government's austerity excesses, holding the PCs (and NDP) to account, and been a voice and force for positive change for Manitobans across the province.”
- “Vote for a government that stands with you and for you, with no one left behind”



# Cross-cutting themes

- Fighting for “All Manitobans”/  
“Fighting for you”
- “Bright future”/  
“Bright opportunities ahead”



# Putting it all together

Hi \_\_\_\_\_, it's so great to see you at the luncheon today! Your ongoing support of the CF community in Manitoba means so much. I'm Chelsea, I live in your constituency and we've corresponded a number of times about access to Trikafta for Manitobans with CF. \*\*\*\* My 7-year old nephew, Jack, started Trikafta last November and it's made such an incredible difference to his health and energy levels. He's scoring more hockey goals than ever before! Thank you again for your instrumental role in bringing Trikafta access to Manitoba. \*\*\*\*

While having the drug in Manitoba is wonderful, there are some significant financial barriers for some Manitobans to access this drug. In fact, a recent study found that Manitoba has some of the highest pharmacare deductibles in Canada. I know you're invested in health equity and not leaving anyone behind – especially people who may face socioeconomic barriers to accessing this transformative care. I would be happy to email you some further information about the work we're doing to reduce the pharmacare deductible in Manitoba for life-saving medications, and perhaps we could set up a time to discuss further.

Introduction/Personal positioning/  
Acknowledgment of what has already been done

Element of Story/Personal Connection

Statistic/Framing the Issue/  
Connecting to shared values

Positive Action/Possible Follow Up