AGENCY THEORIES OF CHANGE AND OUTCOME INDICATORS

2022

Revised 2021 November 25

Theory of Change Overview

A Theory of Change is the cornerstone of FCSS Calgary's contract with an agency for delivering a specific program. For each funded program, FCSS requires a Theory of Change, which includes:

- **Full Legal Agency Name** (capitalized) and **Program Name:** These will be used for the FCSS contract and both the FSII and FIMS databases.

- **Need:** A short paragraph with relevant statistical information about the population to be served. Footnotes are used to cite complete references and data sources.

- **Goal:** A short sentence that clearly states the long-term outcomes the program is expecting to achieve (not the goals of the agency). *To…*

- **Strategy:** The specific strategies that will be used by the program to achieve the goal, including who the program is aimed at (target audience), what will be done (program content), where and how it will be delivered, and when. This should include information on frequency, duration, and program cycle (e.g., runs two hours per day three days per week in quarterly cycles; runs once a week for three hours from September to December and January to June; year-round, ongoing registration with post-testing done every March).

- **Rationale:** A summary of key research findings that support why the strategy being used is a best or promising practice for achieving the program goal. Key research findings are provided in the FCSS Research Briefs, which are posted on the "Funding Framework" page of the FCSS website at www.calgary.ca/fcss. They describe best and promising practices in the areas of preventive social support programs funded by FCSS. For a deeper understanding of why to use a particular approach, agencies can refer to the original research cited in the FCSS Research Briefs. Footnotes are used to cite complete references.

- **Indicators:** The outcome indicators that will be used to measure the effects of the program strategy in making the changes needed to achieve the program goal are listed. They generally include "FCSS Social Inclusion Indicators" (FSII surveys, listed by number and name) or, less often, indicators of "Policy or Systems Change" or "Community Development Contributions." See the "Agency Resources" page of the FCSS Calgary website at www.calgary.ca/fcss. In very rare cases, indicators may be designated as "Outputs Only" or as "Infrastructure."

- **Footnotes:** Footnotes are used to provide complete references for the research that identifies the need and provides the rationale to support the program strategy. The intention is to facilitate learning among agencies that wish to explore particular program areas in more depth.

Creating or Revising a Theory of Change

Before you begin to revise an existing Theory of Change (TOC), please ask your FCSS Partnership Specialist to send you a copy of the latest version of your TOC. Please make all revisions using that document. If you plan to develop a TOC for a new program, please ask your FCSS Partnership Specialist for the latest version of the TOC Template so you can use that to create your TOC. Thank you!

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ABORIGINAL FRIENDSHIP CENTRE OF CALGARY
- **Honouring the Bonds Parenting Program**

Revised 2018 September 25

THEORY OF CHANGE:

Need: For Indigenous programming to be effective, the root causes of intergenerational trauma must be addressed. This complex form of post-traumatic stress[1] resulting from the impact of residential schools requires three integrated actions: (1) reclaiming history by learning about the experience and legacy of the residential school system; (2) cultural activities that build self-esteem and positive identity; and (3) traditional healing—using traditional teachings methods and Western approaches—to support long-term healing and skill development for Indigenous children and parents/caregivers. This can be achieved through educational and psychosocial programming based on the Niitsitapi Little Birds model around early parenting. This approach integrates strong cultural components with Early Childhood Development (ECD) principles and involvement of family and extended family.

Goal: To support ECD parenting and long-term healing among Indigenous children and their caregivers who experience social and cultural challenges resulting from intergenerational trauma.

Strategy: Traditional Indigenous approaches that integrate Western activities with cultural and spiritual practices, protocols, and teachings will be offered to maximum 25 parents/caregivers and their Indigenous children, ages birth to five, The program is set up as a "healing journey" to mediate the impact of intergenerational trauma through strong cultural content and participation. Parents/caregivers will attend activities one day week (three hours per day) over a period of 40 weeks. The overall program is divided into four distinct teaching modules, each one offered over a 10-week period. Cultural mechanisms integrated into programming provide parents/caregivers with a sense of identity, resiliency, self-esteem, parenting and coping skills, knowledge, and healing. Activities will be delivered at the AFCC facility, with presenters, Elders, and knowledge keepers attending throughout.

Rationale: The impact of intergenerational trauma, and its link to the many challenges Indigenous families face today, must be acknowledged. Instilling strong parenting skills and connections back to the culture are essential in healing and helping Indigenous parents to become healthy.[2] The four principles of the Niitsitapi Little Birds model—Feeling, Thought, Creation, Sound—blends Indigenous approaches of child development and parenting with research and best practice from Western traditions. This integration is critical since intergenerational trauma is the result of colonization. Positive psychology and resiliency are closely tied with trauma and, therefore, is a focus of effective programming. Activities that build capacity, resiliency, self-motivation and healing are as important as teaching child development/parenting skills and knowledge. [3]

Indicators:
50 – Sense of Cultural Belonging and Feeling Supported
52 – Understanding Traditional and Community-based Parenting Practices
54 – Traditional Healing Practices for Individuals

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[1] Brokenleg, M. (2012). "Transforming cultural trauma into resilience." *Reclaiming Children and Youth.* 21(3): 9-13.
[2] Brendtro, L.K., Brokenleg, M., Brockern, S.V. (Fall 2014). "Environments where children thrive: The circle of courage model." *Reclaiming Children and Youth.* 23(3): 10-15
[3] RM Research & Evaluation, Inc. (2014). "FCSS reporting framework: Aboriginal indicators (Phase II)." *Family & Community Support Services, Calgary*: 2.

ACTION DIGNITY SOCIETY

- **LEAD for Change**

THEORY OF CHANGE:

Need: From 2006 to 2016, Calgary's visible minority population increased from 30.1% to 36.2%[1]. Members of ethnocultural communities collectively face barriers to full social, economic and civic participation[2]. There is a need for the knowledge, experiences and solution ideas of these communities to inform decision making since there is a persistent exclusion of their presence at the tables of policy-making, or if included, they are peripheral to decision-making structures.[3]" Equally important is the need to engage decision makers to listen to, understand and act towards incorporating a racial equity lens in frameworks and practices of policies and systems.

Goal: LEAD for Change will promote racial equity, inclusion and cultural awareness in public systems and policies and address systemic inequities in public institutions, government and service systems so members of ethno-cultural communities can fully participate in economic, social and civic life. With recognition that policy windows and priorities of ethnocultural communities change over time, issues currently targeted for systems and policy change for 2020 to 2023 include: (i) Workers' Wellness and Workers' Rights legislation, (ii) Transformative Democratic Participation in Local Governance, (iii) Human Rights, and emerging policy issues that significantly impact ethnocultural communities.

Strategy: LEAD for Change will use a three-part strategy including community learning/organizing, community-based participatory action research, and community engagement/action in systems change work. Each year will focus on at least 2 issues - workers' rights legislation, transformative democratic participation in local governance, human rights, and emerging policy issues. Community Brokers will be trained to engage community members as participants and co-creators of learning, research and action and strengthen natural supports in their communities to act as system navigators. ActionDignity will share research results and produce policy briefs. Action planning will be conducted with ethnocultural groups to turn learnings into actions that implement community-based prevention ideas or influence systems change. Community members will be trained to analyze and raise awareness on policy issues through learning opportunities that build their capacity to engage in systems change work. Roundtable discussions and consultations will occur three to four times per year with key decision makers and system representatives. Progress will be monitored with program evaluation tools and FCSS year-end reports.

Rationale: Equitable systems change is a two-way street: ethnocultural communities must participate in and inform decision making; decision-makers must equitably invite and consider their contributions and be willing to make changes accordingly[4]. ActionDignity uses CBPAR to facilitate mindset shift and build capacity for systems change action[5]. With support from ActionDignity, communities can assert racial equity lens to influence change. Such grassroots involvement in research, relationship building/groundwork with decision makers, and consultations between diverse groups and decision makers are recognized ways to influence both institutional and policy change[6].

Indicators: Policy or Systems Change

[1] Statistics Canada. 2016 Census

[2] Omidvar & Richmond 2003. Immigrant Settlement and Social Inclusion in Canada. Perspectives on Social Inclusion. January 2003

[3] Budhu, C. 2001. Research project on visible minority communities in Canada. Voluntary Sector Initiative Report. Ottawa. p3. Web http://www.vsi-isbc.org/eng/about/pdf/visible_minorities_report.pdf

[4, 6] Merrill Cooper, Guyn Cooper Research Associations (2006). Pathways to Change: Facilitating the full participation of diversity groups in Canadian society. Alberta Community Development, Human Rights & Citizenship, Department of Canadian Heritage. p2, 19 & 21. Web http://www.assembly.ab.ca/lao/library/egovdocs/2006/alcd/164744.pdf

[5] Tetui, M. et. al. (2017). Experiences of using a participatory action research approach to strengthen district local capacity in Eastern Uganda. Global Health Action. Web https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5645723/

ALEXANDRA COMMUNITY HEALTH CENTRE

- **The Alex Food and Wellness Program, Community Food Centre**

THEORY OF CHANGE:

Need: Greater Forest Lawn (GFL) communities' 'tipping point' characteristics put them at risk of food insecurity. These include female-headed lone parent families, households renting accommodations, new immigrants, Aboriginal people living off-reserve, and households whose major income sources are welfare, unemployment insurance or Workers' Compensation.[1] Compared to Calgary, GFL has a higher per cent of immigrants and residents who speak neither French nor English, an indicator for social isolation.[2] GFL has a higher percentage of Aboriginal people compared to city-wide. The median household income is 30 per cent less than the rest of Calgary and 22 per cent of residents live below the Low Income Cut Off compared to 14 per cent city-wide.[3] GFL residents spend on average seven to 21 per cent more of their income on housing, leaving less to spend on food.[4]

Goal: To address food insecurity, poor health, and social isolation through programming in food access, skills, education and engagement to build a foundation for community development, health and well-being.

Strategy: The Community Advocacy component offers community action training to people with lived experience of poverty, linking local challenges to wider systemic issues and enabling them to be effective advocates for themselves and their neighbours on local and big-picture issues. It also provides information, referrals and other supports and contributes to larger political and social justice campaigns to address roots causes of food insecurity, poverty and other issues. Literacy, transportation and other supports ensure that marginalized people can be involved, with emphasis on having fun working together. The program creates leadership and mentorship opportunities and information about the food system, including specific matters such as local agriculture, hunger and food insecurity and sustainable farming.

Rationale: One-quarter of food insecure households does not access food banks because of the associated stigma. Therefore, The Alex and its partner Community Food Centres Canada (CFC) avoid traditional emergency food program practices.[5] Community meals, cooking, gardening and markets have been associated with increased social capital, including better economic performance, lower crime levels, more effective government institutions, higher educational performance, improved problem solving and improved physical health.[6] Healthy food skills, knowledge and attitudes promote healthier eating such as lower fat and higher key nutrient intake. Almost 90 per cent of CFC participants made friends and felt that they belonged to a community. [7]

Indicators:
Community Development

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[1] Tarasuk, Valerie, Joyce Chen et al. 2015. "Association between household food insecurity and annual health care costs." Canadian Medical Association Journal 187(14): E429-E436.

[2] Statistics Canada. 2011. "National household survey profile, Calgary Forest Lawn, Alberta."

[3] Statistics Canada. 2011. "National household survey profile, Calgary Forest Lawn, Alberta."

[4] Statistics Canada. 2011. "National household survey profile, Calgary Forest Lawn, Alberta."

[5] Canadian Food Centres Canada. 2015. What is a community food centre? Website. http://cfccanada.ca/ what_is_a_community_food_centre.

[6] Putnam, Robert. 1993. "The prosperous community." The American Prospect 4(13): Page 5.

[7] The Stop Community Food Centre. n.d. "Community cooking." Toronto: Community Food Centres of Canada.

ALEXANDRA COMMUNITY HEALTH CENTRE
- **The Alex Youth Health Centre, Youth Case Management**

Revised 2018 November 20

THEORY OF CHANGE:

Need: In the past year, The Alex Youth Health Centre (YHC) has witnessed an alarming escalation in the number of youth aged 16 to 24 years who come to the YHC seeking help with social and emotional challenges, most commonly the inter-related problems of social isolation, substance use, extreme poverty and street involvement in conjunction with depression and anxiety. At present, there are approximately 350 such youth who attend the YHC at minimum twice a month, and about 70% (245) urgently require help in the form of advocacy, counselling, and intensive case management to prevent a downward spiral into addictions, mental illness, and complete street and criminal entrenchment.

Goal: To improve the well-being and positive development of youth through counselling, advocacy, and intensive case management.

Strategy: Two Complex Case Managers will coordinate intensive case management (ICM) and provide counselling for about 245 youth at the YHC. ICM is an evidence-based, recovery-based approach using multi-disciplinary teams to help higher acuity clients identify goals and support them to improve quality of life through developing plans, enhancing life skills, addressing health and mental health needs, engaging in meaningful activities and building social and community relations.[1] A brief online summary of an ICM Toolkit, written by Alex staff, outlines the six components of and standards of practice for ICM[2]. ICM is designed for clients who are identified as needing intensive support for a time-delineated period, with the length of time depending on the needs of the client. The staff to client ratio is generally 1 to 20.

Rationale: Clients experience poor physical and emotional health due to the experience of adverse childhood experiences, trauma over the life course, and current living conditions and behaviours.[3] Mood, anxiety, and social detachment associated with adverse childhood experiences (ACEs) usually emerge in adolescence and early adulthood.[4] Young people who have experienced ACEs are at risk for lifelong functional impairment, addictions, violence victimization and perpetration, risky lifestyle behaviours, and complete street and criminal entrenchment.[5] Emerging adulthood involves important role changes which can be seriously compromised in young adults who struggle with social and emotional challenges. Supporting clients with these problems can prevent addictions and mental health problems later in life.[6]

Indicators:
38 – Youth – Grades 7-12 – Self-Esteem, Self-Confidence, Identity

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[1] Bruns, E.J.; et al. 2015. "Effectiveness of wraparound versus case management for children and adolescents: Results of a randomized study." Administration and Policy in Mental Health and Mental Health Services Research, 42(3), 309-322; Slesnick, N.; et al. 2015. "A comparison of three interventions for homeless youth evidencing substance use disorders: Results of a randomized clinical trial." Journal of Substance Abuse Treatment, 54, 1-13.

[2] Available for download: https://www.ardn.ca/projects/Implementing%20Housing%20First%20Intensive %20Case%20Management.pdf

[3] Mersky, J.P.; Topitzes, J.; Reynolds, A.J. 2013. "Impacts of adverse childhood experiences on health, mental health, and substance use in early adulthood: A cohort study of an urban, minority sample in the US." Child Abuse & Neglect, 37(11), 917-925; Nurius, P.S.; et al. 2015. "Life course pathways of adverse childhood experiences toward adult psychological well-being: A stress process analysis." Child Abuse & Neglect, 45, 143-153.

[4] de Lijster, J.M.; et al. 2017. "The age of onset of anxiety disorders: a meta-analysis." Canadian Journal of Psychiatry, 62(4),237–246; Vida, R.; et al. 2009. "Emerging adult outcomes of adolescent psychiatric and substance use disorders." Addictive Behaviors, 34, 800–805;

[5] Nurius, P.S.; et al. 2015. "Life course pathways of adverse childhood experiences toward adult psychological well-being: A stress process analysis." Child Abuse & Neglect, 45, 143-153

[6] Johnson, D.; et al. 2018. "Adult mental health outcomes of adolescent depression: A systematic review." Depression and Anxiety, in press; Davis, M. 2012. "Prevalence and impact of substance use among emerging adults with serious mental health conditions." Psychiatric Rehabilitation Journal, 35(3), 235-243; Schilling, E.A;, Aseltine, R.H.; Gore, S. 2007. "Adverse childhood experiences and mental health in young adults: A longitudinal survey." BMC Public Health, 7(1), 30.

ANTYX COMMUNITY ARTS SOCIETY
- **CAS, Youth Arts Action Program**

THEORY OF CHANGE:

Need: The communities that comprise Greater Forest Lawn and northeast Calgary have high rates of vulnerable youth who are at risk of social dependency and poor academic achievement.[1] Research indicates that vulnerable youth are at an increased likelihood of involving themselves in risky behaviours.[2]

Goal: To provide arts-based opportunities for youth aged 12 to 16 in the Greater Forest Lawn and northeast Calgary communities during the after-school hours.

Strategy: The Calgary AfterSchool Youth Arts Action Project engages youth to develop community arts projects intended to benefit both youth and the community. Using social emotional learning and SAFE (Sequenced, Active, Focused, Explicit) programming principles, the program focuses on group building, the development of arts and leadership skills, and the implementation of community arts projects. The program begins with an interactive process that allows participants to get to know each other and explore a variety of artistic media. Participants identify the audience they want to reach, the kind of change they want their project to create, and the arts medium to be used (e.g., theatre, painting, photography, videography, music). Supported by qualified professional artists and staff, youth cultivate both artistic and leadership skills. Each project concludes with a community performance or presentation followed by group reflection on the impact of the project. The Youth Arts Action Project runs twice a week for three hours during the school year (September to June). One project will be created from September to December, another from January to June. Program registration will be open and ongoing, with a major focus on outreach and recruitment in September and January.

Rationale: Research shows that regular participation in structured, high-quality after-school programming using social emotional learning and SAFE principles supports the healthy, physical, social, and emotional development of children and youth.[3] Youth, once engaged in after-school community arts-based programming, exhibited enhanced art skills, increased confidence, improved pro-social skills, improved conflict resolution skills, as well as a decrease in emotional problems when compared to a control group. [4] [5] [6]

Indicators:
38 – Youth – Grades 7-12 – Self-Esteem, Self-Confidence, Identity

Calgary
AfterSchool

[1] City of Calgary. 2010. Indices of Community Well-Being, 2006 for Calgary Neighbourhoods, Winter 2010. Calgary: City of Calgary, Community and Neighbourhood Services, Social Policy and Planning. Pages 12 and 28.
[2] Farnum, M., and R. Schaffer. 1998. YouthARTS Handbook: Arts Programs for Youth at Risk. New York: Americans for the Arts. Page 24.
[3] Cooper, Merrill. 2009. "Intentional programming with opportunities for autonomy and choice." Outcome: Positive child and youth development. FCSS Calgary Research Brief No. 1. Calgary: City of Calgary, FCSS Calgary. Page 5.
[4] Chinmen, M.J., and J.A. Linney. 1998. "Toward a Model of Adolescent Empowerment: Theoretical and Empirical Evidence." Journal of Primary Prevention 18(4): 393-413. Page 396.
[5] Clawson, H.J., and K. Coolbaugh. 2001. "The YouthARTS Development Project." Juvenile Justice Bulletin (May): 7.
[6] Wright, R., L. John et al. 2006. "Community-based Arts Program for Youth in Low-Income Communities: A Multi-Method Evaluation." Child and Adolescent Social Work Journal 23(5-6): 635-652. Page 649.

ARUSHA CENTRE SOCIETY
- **Calgary Dollars**

THEORY OF CHANGE:

Need In 2015, there were approximately 139,000 individuals in Calgary living below the low-income cut-off rate at 11.4% of the population.[1] Strong communities have positive effects on residents' outcomes and require interventions that work on multiple levels.[2]

Goal: To increase social and economic capital, as well as financial and digital literacy, all with the goal of increasing community resilience.

Strategy: The Calgary Dollars (C$) program encourages socio-economically vulnerable Calgarians to be more socially and economically active through the engagement and participation of members via community networks, events, educational workshops, and peer networking support groups. C$ collaborates with multiple affordable housing agencies where participants can earn extra income engaging with their community and use Calgary Dollars towards rent and basic needs. Events include upwards of 6-8 community markets, and multiple seasonal events as identified with our collaborators. Online skill sharing sessions support participants to increase skills, exchange ideas/resources and build social connections. In-person supports are delivered with numerous collaborators. Monthly communications to 2200 users. An annual post-test survey campaign lasts 3-4 months.

Rationale: Research demonstrates that a resilient economy is possible through a Community Economic Development (CED) approach.[3] Complementary currency (CC) programs such as C$ are known as CED innovations and have been shown to provide specific economic and social benefits to vulnerable low-income individuals, seniors and families.[4] CCs have a 9:1 SROI and proven robust outcomes.[5,6,7] Involvement in community events, projects and networks also increase a sense of community and increases asset building capacity.[8] Personal networks can lead to additional income.[9] Strong neighbourhoods have high levels of social cohesion and positive community economic development.[2] CC programs have helped develop personal and social capital and cohesion; in one example, 42% learned new skills, 58% said their social contacts increased, and 46% began volunteering and had not done so before.[4] The Calgary Dollars app and desktop interface are similar to online banking platforms and aid to increase digital and financial literacy. desktop interface are similar to online banking platforms and aid to increase digital and financial literacy.

Indicators:
#7 – Social Inclusion – Participation in Neighbourhood
#14 – Individual / Family Poverty – Perceptions

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[1] City of Calgary. 2016. Calgary Profile, Chapter 4: Income. Calgary: Data about Calgary. Page 7.

[2] Calgary Neighbourhoods. 2020. Community Development. (Calgary, AB: Family&Community Support Services, The City of Calgary).

[3] Momentum. 2011. "Community Economic Development and The City of Calgary." Calgary: Momentum Community Development Organization. Pages 1-7.

[4] Spice. 2016. "Positive Change in Challenging Times: How Spice Time Credits are creating system change." Cardiff, New South Wales. Spice Innovations Ltd. Pages 1-17.

[5] Soder, N. May 2008, Community Currency: An Approach to Economic Sustainability in our Local Bioregion. Thesis Submitted to Humboldt State University. Page 29.

[6] City of London. 2017. Evaluation and Impact of the London Time Bank Network.

[7] Apteligen Ltd. 2020. Evaluation of Impact: Tempo Time Credits 2020.

[8] "Asset building." Calgary Neighbourhoods. 2020. Individual and family economic self-sufficiency. Calgary, AB: Family & Community Support Services, The City of Calgary. Pages 10-11.

[9] "Diverse social networks." Calgary Neighbourhoods. 2020. Individual and family economic self-sufficiency. Calgary, AB: Family & Community Support Services, The City of Calgary. Page 8.

AWO TAAN HEALING LODGE SOCIETY
- **Youth Mentorship Program**

THEORY OF CHANGE:

Need: Colonial genocidal processes have separated Indigenous peoples from their cultural, which has led to community, family and individual suffering. This has had serious inter-generational impacts of trauma on Indigenous youth. Symptoms of this experience may include dropping out of school, teen pregnancy, isolation, substance abuse, violent relationships and potential incarceration.[1] Indigenous youth have broken circles and the fault usually starts with damaged relationships. Having no bonds to significant adults, they chase counterfeit belongings through gangs, cults, and promiscuous relationships. Some are so alienated that they have abandoned the pursuit of human attachment. Guarded, lonely, and distrustful, they live in despair or strike out in rage. Families, communities, schools and youth organizations are being challenged to form new and innovative ways to meet these challenges so that there will be no psychological orphans.

Goal: To promote a strength-based approach and positive youth development for Aboriginal girls and boys with cultural mentors including Elders and Traditional Knowledge Holders.

Strategy: Through the integration of traditional Indigenous knowledge and practices with Western practices, this program will empower and educate 25 to 50 Aboriginal youth aged 12-17. This program will involve male and female role models to mentor youth as well as cultural mentors who will use various traditional teachings such as Medicine Wheel teachings, Sacred Circles, and visits to sacred sites. "Medicine" as used in the wheel, refers to healing, teaching, enlightening and spiritual energy. It teaches about respect and equality towards every living being.[2] Over the course of the year 3 cohorts of 15 will attend activities two days a week with the program and agency staff will provide follow-up and support. Activities are divided into four modules: Strengths and Gifts of Youth (Mental); Historical Traumas (Emotional); Prevention of Violence (Physical) and Healthy Relationships/Healthy Sexual Relationships (Spiritual). A celebration of the program will conclude with a Rites of Passage Ceremony and a Traditional Feast.

Rationale: This preventative program integrates the FCSS Aboriginal Research Brief and is intended to "Build a Culture of Peace" clearly connecting and intentional in reducing and addressing core issues such as the impacts of residential schools and intergenerational trauma of Aboriginal peoples.[3] It also articulates and uses a healing lens. Mentoring allows for an opportunity to" reconnect the young with the old and to reweave the intergenerational threads that are essential to a healthy society."[4] A strong foundation in culture is strongly recommended by community, elders to be the center of programming targeted for youth. "Culture must not only guide our work, it must be understood as a social determinant of health. Culturally specific interventions are holistic and attend to spirit, mind, body and emotions. This program will ensure a strong cultural foundation for youth to learn about themselves.

Indicators:
50 – Sense of Cultural Belonging and Feeling Supported

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[1] Tutu, Desmond. 2002. "Foreword." In Brendtro, Larry K, Martin Brokenleg, and Steve Van Bockern. Reclaiming Youth At Risk: Our Hope for the Future. Bloomington, IN: Solution Tree Press. Page ix.

[2] Brenda Many Fingers. 2007. "Awo Taan Self-Assessment Wheel Training Manual." Calgary: Awo Taan Healing Lodge Society. Page 14.

[3] Pinnow, Joanne. 2014. "Healing Practices for Women." Aboriginal brief. FCSS Calgary Research Brief 6. Calgary: City of Calgary, FCSS Calgary. Page 22.

[4] Benard, Bonnie. 2007. "Mentoring Shows the Power of Relationship." In Henderson, Nan (ed.), with Bonnie Benard, and Nancy Sharp-Light. Resiliency in Action: Practical Ideas for Overcoming Risks and Building Strengths in Youth, Families, & Communities. Ojai, CA: Resiliency in Action, Inc. Page 116.
First Nations Mental Wellness Continuum Framework - Summary Report - Canada.ca

BIG BROTHERS BIG SISTERS SOCIETY OF CALGARY AND AREA
- **Community Mentoring**

THEORY OF CHANGE:

Goal: Through a developmental relationship with a caring adult mentor, expanding their network of natural supports, a young person is supported to improve their social-emotional skills, executive function and resilience, ultimately successfully transitioning to adulthood.

Strategy: Community mentoring programs provide one-to-one mentoring relationships for young people between the ages of 6 and 24. The programs match a screened and trained adult volunteer mentor with a young person who needs a positive relationship with an adult role model. The matches are based on mutual personality traits, interests and the specific goals and needs of each volunteer and young person.

In training, mentors are taught how to build a developmental relationship with their mentee. In a developmental relationship, the mentor expresses care, challenges growth, provides support, shares power and expands possibilities for the child or youth. Through this relationship, the young person builds their social-emotional skills, their executive function and their resilience. The presence of a trusting mentor buffers them against the toxic stress caused by trauma, and the mentor additionally acts as a role model for them.

Matches are based on best practices and are conducted, supervised and supported by professional staff.[1] The mentor and mentee meet on a weekly basis for a minimum of one year. Beyond this one-year commitment, many young people gain a life-long mentor and role model who stays connected with them throughout their journey and developmental stages – a 'natural support'. When the match does close, mentoring coordinators ensure a positive closure experience for both parties.

Rationale: Community 1:1 mentoring is a critical preventative and strengths-based support for children and youth in our community. A mentor can respond to the emerging needs of a young person before a developmental challenge occurs. Mentoring programs have the potential to foster improvements in self-esteem; better relationships with parents and peers; greater school connectedness; improved academic performance; and reductions in substance use, violence, and other risk behaviours.[2] Mentoring builds connections with a wide range of people who are useful in linking youth to external assets, generating social capital and establishing lasting connections to their communities.

Indicators:
27 – Children – Grades 4-6 – Adult Confidant
29 – Youth – Grades 7-12 – Adult Confidant
34 – Children – Grades 4-6 – Self-Esteem, Self-Confidence, Optimism
38 – Youth – Grades 7-12 – Self-Esteem, Self-Confidence, Identity

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[1] Cooper, Merrill. 2014. "Mentoring programs." Positive child and youth development. FCSS Calgary Research Brief 1. Calgary: City of Calgary, FCSS Calgary. Page 4.
[2] Cavell, Timothy, David DuBois et al. 2009. "Strengthening Mentoring Opportunities for At-Risk Youth." Policy Brief. Portland, OR: Education Northwest. Page 2.

BIG BROTHERS BIG SISTERS SOCIETY OF CALGARY AND AREA
- **Mentoring In Schools**

THEORY OF CHANGE:

Need: School is important for belonging and community, and academic achievement increases when school is seen as safe and welcoming. Positive relationships with adults and peers are critical to brain development and can protect from toxic stress, improve executive function and social emotional skills, and model resilient behaviours. However, many young people in Calgary and Area lack such supports even as they struggle with Adverse Childhood Experiences (ACEs).

Goal: Through a developmental relationship with a caring mentor, expanding their network of natural supports, a young person is supported to improve their social-emotional skills, executive function and resilience, ultimately successfully transitioning to adulthood.

Strategy: Volunteer mentors are screened, trained and supported by program staff to mentor children once a week throughout the school year. The mentors are matched with children at community locations and schools, where they receive on-site support and guidance from trained professional staff each week. Mentors and mentees take part in positive activities and build a developmental relationship during their time together. This means that the mentor expresses care, challenges growth, provides support, shares power and expands possibilities. The interactions that they have together in this trusting relationship show the child how to management their emotions and attention, make decisions and problem solve, build a sense of confidence and self worth and learn how to interact with others in a positive and healthy way.

Academic performance improves in children who are mentored: truancy rates drop, children more readily connect to school and adults, are less likely to drop out of school and go on to achieve more. In an impact study of these Big Brothers Big Sisters' school-based mentoring programs, teachers reported that their mentored students experienced positive effects in: academic performance, school efficacy, rates of truancy, confidence about their college prospects, and more.[1]

Rationale: A wide range of developmental outcomes can be achieved through the one-on-one school-based mentoring model. Building trustworthy relationships helps instill in the young mentees increased confidence and self-esteem and enhanced social skills.[2] It helps address behavioural issues and interpersonal challenges in a timely, organic and resourceful way. Reports from BBBS mentoring coordinators indicate that school-based mentoring is often a more appealing option for new immigrants, families with limited financial resources and families who do not have established community connections. This is because the school-based model is typically considered less threatening than community-based adult mentoring, and our staff can more easily receive referrals of children and youth whose parents are less engaged with community agencies.

Indicators:
38 – Youth – Grades 7-12 – Self-Esteem, Self-Confidence, Identity
34 – Children – Grades 4-6 - Self Esteem, Self-Confidence, Optimism
27 – Children – Grades 4-6 – Adult Confidant

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[1] Herrera, C., Grossman, J.B., Kauth, T.J., Feldman, A.F., McMaken, J., & Jucovy, L.Z. (2007). Making a difference in schools: The Big Brothers Big Sisters school-based mentoring impact study. Philadelphia: Public/Private Ventures.
[2] Cooper, Merrill. 2014. "Mentoring programs." Positive child and youth development. FCSS Calgary Research Brief 1. Calgary: City of Calgary, FCSS Calgary.

BOW CLIFF SENIORS
- **Seniors Programs**

THEORY OF CHANGE:

Need: In 2017, 11 per cent of Calgary's population was aged 65 or older, with a 23 per cent population increase projected to occur by 2022. The population aged 75 or older is expected to grow by 14 per cent during the same period. Risk factors associated with social isolation among seniors include age over 75, low income, living alone, health or mobility difficulties, and language or cultural barriers. Currently, 26 per cent of Calgary seniors live alone and almost 40 per cent of unattached Calgary seniors live in poverty.[1]

Goal: To promote social connections and reduce social isolation among seniors by providing programs and services that are accessible, affordable, and account for health, mobility and cultural considerations. Seniors programs are intended to promote and enable physical, mental, and social engagement within the community.

Strategy: Social connectedness is associated with better physical and mental health, quality of life, and longer life.[2] Seniors centres across the city offer social, educational, recreational, and leisure programs and activities for seniors aged 65 and older. Programs are coordinated by trained staff and, where possible, are designed with local seniors to respond to preferences for social and community engagement and supports; provide physical activity and recreation for seniors of diverse interests and abilities; and create an inviting and inclusive space for connecting to important community supports for seniors. Programming is ongoing and flexible to respond to needs and interests as they are identified. Centres are open year-round on weekdays, as well as some Saturdays and some evenings to host monthly or bi-weekly socials or special events.

Rationale: Social isolation in the seniors' population can be prevented and reduced by enhancing protective factors such as social ties (including with younger friends and neighbours), good health, creative expression, and communication skills. Community engagement can be facilitated with accessible services, access to transportation, and opportunities to take up meaningful roles in society.[3] Programs that capitalize on seniors' experiential knowledge and affirm and enable opportunities for reciprocity, feeling valued, and making meaningful contributions contain the psychological preconditions for building social ties. Best practices include group programs with an educational or training component, intergenerational programs, gatekeeper programs, volunteer opportunities and targeted social or support activities, which can be tailored to participant health and activity limitations.[4] Programs should be facilitated by quality trained staff and enable participant involvement in program design, implementation, and review.[5]

Indicators:
4 – Positive Social Ties and/or Bonding Social Capital
6 – Social Inclusion – Social Participation

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[1] The City of Calgary, Calgary & Region Economic Outlook, Spring, 2018.
[2] Austin, C., R. McClelland, J. Sieppert, and E. Perrault. n.d. The Elder Friendly Communities Project: Understanding Community Development and Service Coordination to Enhance Seniors' Quality of Life. Calgary: University of Calgary, Faculty of Social Work. Page 20.
[3] Edwards, P. and A. Mawani. 2006. Healthy Aging in Canada: A New Vision, A Vital Investment From Evidence to Action. Ottawa: Federal/Provincial/Territorial Committee of Officials (Seniors), Healthy Aging and Wellness Working Group. Pages 17-18.
[4] Cooper, Merrill. 2009. "Vulnerable Seniors." Outcome: Positive Social Ties and Vulnerable Populations. FCSS Calgary Research Brief No. 4. Calgary: City of Calgary, FCSS Calgary. Pages 12-15.
[5] Cattan, M., M. White, J. Bond, and A. Learmouth. 2005. "Preventing Social Isolation and Loneliness among Older People: A Systematic Review of Health Promotion Interventions." Ageing and Society 25: 41-67. Pages 57, 61.

BOWNESS SENIORS' CENTRE

- **Seniors Programs**

THEORY OF CHANGE:

Need: In 2017, 11 per cent of Calgary's population was aged 65 or older, with a 23 per cent population increase projected to occur by 2022. The population aged 75 or older is expected to grow by 14 per cent during the same period. Risk factors associated with social isolation among seniors include age over 75, low income, living alone, health or mobility difficulties, and language or cultural barriers. Currently, 26 per cent of Calgary seniors live alone and almost 40 per cent of unattached Calgary seniors live in poverty.[1]

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Strategy: Social connectedness is associated with better physical and mental health, quality of life, and longer life.[2] Seniors centres across the city offer social, educational, recreational, and leisure programs and activities for seniors aged 65 and older. Programs are coordinated by trained staff and, where possible, are designed with local seniors to respond to preferences for social and community engagement and supports; provide physical activity and recreation for seniors of diverse interests and abilities; and create an inviting and inclusive space for connecting to important community supports for seniors. Programming is ongoing and flexible to respond to needs and interests as they are identified. Centres are open year-round on weekdays, as well as some Saturdays and some evenings to host monthly or bi-weekly socials or special events.

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Indicators:
4 – Positive Social Ties and/or Bonding Social Capital
6 – Social Inclusion – Social Participation

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[1] The City of Calgary, Calgary & Region Economic Outlook, Spring, 2018.

[2] Austin, C., R. McClelland, J. Sieppert, and E. Perrault. n.d. The Elder Friendly Communities Project: Understanding Community Development and Service Coordination to Enhance Seniors' Quality of Life. Calgary: University of Calgary, Faculty of Social Work. Page 20.

[3] Edwards, P. and A. Mawani. 2006. Healthy Aging in Canada: A New Vision, A Vital Investment From Evidence to Action. Ottawa: Federal/Provincial/Territorial Committee of Officials (Seniors), Healthy Aging and Wellness Working Group. Pages 17-18.

[4] Cooper, Merrill. 2009. "Vulnerable Seniors." Outcome: Positive Social Ties and Vulnerable Populations. FCSS Calgary Research Brief No. 4. Calgary: City of Calgary, FCSS Calgary. Pages 12-15.

[5] Cattan, M., M. White, J. Bond, and A. Learmouth. 2005. "Preventing Social Isolation and Loneliness among Older People: A Systematic Review of Health Promotion Interventions." Ageing and Society 25: 41-67. Pages 57, 61.

BRENDA STRAFFORD SOCIETY FOR THE PREVENTION OF DOMESTIC VIOLENCE, THE
- **Counselling and Support Services**

THEORY OF CHANGE:

Need: Annually the Calgary Police service responds to more than 25,000 family violence calls.[1] The incidence of family violence in Calgary has increased steadily for the past five years.[2] Most of the individuals who have been victimized by family violence are women and their children. Leaving a family violence situation is a significant challenge for these women and children but that requires access to a safe housing environment with therapeutic and developmental support services designed to promote healing, build capacity, and facilitate the transition to healthy, independent living.[3]

Goal: Clients who have been impacted by family violence will experience improved holistic well-being including self-care behavior, personal safety, developing healthy relationships, emotional regulation, adherence to recovery, family cohesion and, demonstrated readiness to transition to successful independence. Exiting clients will have the skills, resources, and supports to live lives free of abuse in the community.

Strategy: Every client at the Brenda Strafford Centre (BSS) is assigned a Counsellor and a Case Manager, forming a collaborative Care Team. The Care Team provides support to help clients adjust to living in a safe housing environment, understand and manage emotions, enhance family cohesion, and assist in matters such as securing financial support, budgeting, rental payment, and applying for educational programs or employment. The therapeutic processes used by the Counselling and Supports Program are evidence-based and are delivered in accordance with current best practice. Each client will have access to a minimum of weekly counselling and case management sessions (1 hour each) for the duration of their Shelter stay (1 year). In addition, clients can access counselling and supports more frequently as required by need, with no maximum limit. BSS employs a wrap around care model based on collaborative care plans designed with the client at Intake and revised regularly to reflect change and progress.

Rationale: BSS uses of the Outcome Star Case Management Framework.[4] This Framework addresses individualized priorities based on global research that links addressing the impacts of DV victimization to enhancing domains of wellness.[5] This is integrated within a philosophy of practice that recognizes Social Determinants of Health deficits as primary factors in contributing to both risk and recidivism related to DV.[6] The Outcome Star program is offered in targeted formats and we focus on the "Empowerment Star", "Family Star" and "My Star" tools.[7] The diverse needs among clients require an individualized approach to supporting progress toward inter-related wellness domains with a view to enhancing capacity to achieve independence and improved health and well-being.[8] Trauma informed intervention supports women and children to heal while addressing corollary issues, supporting families to live free of violence through health, housing, connection and financial well-being.[9]

Indicators:
11- Safety from Domestic Violence

[1] Small, Kaylan. 2020. "Reading Between the Lines of Calgary's Domestic Violence Statistics During the COVID-19 Pandemic". Global News. 1-2

[2] City of Calgary. Nov 2020. Addressing Family Violence is More Important than Ever. 1-2.

[3] ACWS. 2017. "Building Informed Service Delivery in Second Stage Shelters Phase II: Final Report." Pages 23-27.

[4] Triangle Consulting Ltd. 2021. "About Outcomes Star." https://www.outcomesstar.org.uk/about-the-star/

[5] Busch, Noel Bridget and Deborah Valentine. 2000. Empowerment Practice: A Focus on Battered Women. Utexas.edu.

[6] Gill, C and Luc Theriault. 2005. "Connecting Social Determinants of Health and Woman Abuse." Presentation. 2nd Annual Atlantic Summer Institute on Healthy and Safe Communities.

[7] Triangle Consulting Ltd. 2021. " Find Your Star". https://www.outcomesstar.org.uk/using-the-star/find-your-star/

[8] Robert Wood Johnson Foundation. 2011. "How Social Factors Shape Health: Violence, Social Disadvantage and Health."

[9] Patrick,A. 2015. "Second Stage Shelter Project: Resource Package." Calgary: ACWS. Page 14

CALGARY BETWEEN FRIENDS CLUB, THE
- **Capacity Building for Social Inclusion**

THEORY OF CHANGE

Need: Individuals with disabilities who are unable to participate fully in their communities experience isolation and lower satisfaction with life.[1] Social and recreational activities for people with disabilities are fundamental to enriching self-esteem, quality of life and mental and physical health.[2] Community stakeholders have identified a gap in service and are eager to gain the knowledge and resources necessary to meet the growing need of their diverse clientele. Some of the biggest barriers to inclusive programming identified include physical accessibility, attitudinal barriers, knowledge and lack of resources. In 2017, Statistics Canada increased the scope of its assessment tool for the Canadian Survey on Disability. This allowed for inclusion of those reporting cognitive and mental health related impairments. 22% of Canadians were identified as having a disability. Given Calgary's 2016 census of 1,392,609, 22% of the population equated to over 300,000 living with a disability in 2016.[3]

Goal: To ensure individuals with disabilities and their families, community recreation providers and relevant systems have the supports and resources needed for individuals to experience a sense of inclusion through social and recreational activities throughout their lifespan.

Strategy: Building capacity for social inclusion requires work at multiple levels to change societal attitudes about people with disabilities. This work includes, direct service delivery, education and support for people with disabilities and their support networks, professional training and development for community service providers and advocating for policy and systems change. Between Friends' staff work with service providers, to review and develop inclusive policies and practices, provide training and support to ensure agencies have the knowledge, skills and resources to establish a best practice approach to inclusion. On average, 40 organizations are supported anually. This work informs broader policy work through the identification of systemic barriers to inclusion. Key policy changes being pursued include universal mandatory inclusion training for service delivery providers.

Rationale: Every young person with or without a disability should have the access to enriching and empowering recreational activities in their own community.[4] Recreation and social activity supports inclusion in two ways: 1) it provides individuals with disabilities with direct opportunities to participate within their communities, and 2) it supports awareness and greater acceptance of diversity in society.[5] Inclusion is about belonging. People have a sense of belonging when they feel accepted, welcomed and valued by others, regardless of their abilities.[6] Inclusion is not about adapting the individual to society, but about shifting attitudes and practices to remove the barriers to participation.[7]

Indicators:
Policy or Systems Change

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[1] Law, M., & King, G. 2000. "Participation! Every child's goal". Today's Kids in Motion, 1, 10-12.

[2] Shikako-Thomas, K., Noemi Dahan-Oliel, et al. 2012. "Play and be happy? Leisure Participation and Quality of Life in School-aged Children with Cerebral Palsy." International Journal of Pediatrics 2012: 1-7.

[3] Statistics Canada 2017. Canadian Survey on Disability.

[4] Participation of Children & Youth with Disabilities In Social Recreation Prepared by: Erica Carson, MSW candidate, Carleton University Edited by: Tara Howlett, MSW, RSW, Social Rec Connect Manager September 4, 2014, Pages 2 & 8.

[5] Mahon, M., Mactavish, J., Bockstoel, E., O'Dell, I., & Siegenthaler. 2000. "Social Integration, Leisure and Individuals with Intellectual Disability". Parks & Recreation 35 (4): 25-40.

[6] Nolan, Catherine Veronica. "Best Practices of Inclusion Services: The Value of Inclusion." Access Today. Winter 2005, Issue 19. National Center on Accessibility. April 27, 2007.

[7] Donnelly, P., & Coakley, J. 2002. "The Role of Recreation in Promoting Social Inclusion". The Laidlaw Foundation. Working Paper Series Perspective on Social Inclusion. December 2002.

CALGARY BRIDGE FOUNDATION FOR YOUTHS, THE
- **CAS, Bridge Club**

THEORY OF CHANGE:

Need: Immigrant children face a number of issues when settling into their new country, which may include limited English language skills, social isolation, lack of empowerment related to ethnic identity, culture shock, adaptation issues, difficulty establishing cross-ethnic friendships, alienation, discrimination and, for many refugees, post-traumatic stress and mental health disorders[1].

Goal: To keep immigrant children positively engaged during critical after-school hours and to empower them to support cultural integration, increase participation, and enhance their sense of belonging.

Strategy: The Bridge Club provides after-school programming for immigrant children in grades 4 to 6 throughout the school year in locations with a high concentration of immigrant children. In each target community, the program is offered in multiple locations (e.g. schools, libraries, housing complexes, and community centres) in order to form a cluster of programming that allows children to participate at least twice per week in two-hour sessions. It provides learning opportunities that use S.A.F.E principles, meaning they are sequenced, active, focused, and explicit. The program uses an outcome-based curriculum intended to build resiliency by addressing four key areas of development: belonging, mastery, autonomy, and generosity. It focuses on social emotional development, empowerment, friendship, life skills, community caring, and sense of belonging. In addition, periodic community outings and events are organized to encourage broader collective participation of children, parents, and community members. Bridge Club staff members are selected to represent a variety of ethno-cultural backgrounds in order to model positive bicultural identity and cultural integration. Staff members have language skills in many of the first languages of program participants. Pre-tests are conducted near the beginning of the school year and post-tests are completed at the end of the school year. For participants who may join during the school year, pre-tests are completed at intake.

Rationale: Research indicates that after-school programming that is intentional and based on social emotional learning principles significantly increases participants' positive feelings about themselves, as well as their positive social behaviours[2]. The benefits are even great for young people that face challenges such as language or cultural barriers and may feel excluded from the mainstream[3]. In 2017, school populations coded as English language learners were approximately 22% and 28% for the Calgary Board of Education (CBE) and Calgary Catholic School District (CCSD) respectively[3]. Trends in the past four years show this number steadily increasing every year[4].

Indicators:
34 – Children – Grades 4-6 – Self-Esteem, Self-Confidence, Optimism

Calgary
AfterSchool

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[1] Immigrant Sector Council of Calgary. 2015. Strategic Actions for Change: Working with Children and Youth of Immigrant Families. Calgary: Immigrant Sector Council of Calgary. Pages 5-12.

[2] Cooper, Merrill. 2014. "After-school programs." Positive child and youth development. FCSS Calgary Research Brief 1. Calgary: City of Calgary, FCSS Calgary. Pages 6-7. [3] Cooper, Merrill. 2014. "Developmental programming." Positive child and youth development. FCSS Calgary Research Brief 1. Calgary: City of Calgary, FCSS Calgary. Page 4.

[3] Calgary Board of Education. 2017. Calgary Board of Education (CBE) Financial Review Report. Calgary: Calgary Board of Education. Page 48. Retrieved from https://education.alberta.ca/media/3739809/cbe-report_04apr18.pdf.

[4] Calgary Board of Education. 2017. Calgary Board of Education (CBE) Financial Review Report. Calgary: Calgary Board of Education. Page 49. Retrieved from https://education.alberta.ca/media/3739809/cbe-report_04apr18.pdf.

CALGARY BRIDGE FOUNDATION FOR YOUTHS, THE
- **CAS, NxtGen**

THEORY OF CHANGE:

Need: Immigrant youth face a number of issues when settling into their new country, which may include limited English language skills, social isolation, lack of empowerment related to ethnic identity, culture shock, adaptation issues, difficulty establishing cross-ethnic friendships, alienation, discrimination and, for many refugees, post-traumatic stress and mental health disorders[1].

Goal: To keep immigrant youth positively engaged during critical after-school hours and to empower them to support cultural integration, increase participation, and enhance their sense of belonging.

Strategy: The NxtGen program provides after-school programming for immigrant youth in grades 7 to 12 throughout the school year in locations with a high concentration of immigrant youth. In each target community, the program is offered in multiple locations (e.g. schools, libraries, housing complexes, and community centres) in order to form a cluster of programming that allows youth to participate at least twice per week in two-hour sessions. It provides learning opportunities that use S.A.F.E principles, meaning they are sequenced, active, focused, and explicit. The program uses an outcome-based curriculum intended to build resiliency by addressing four key areas of development: belonging, mastery, autonomy, and generosity. It focuses on tutoring, social emotional development, empowerment, friendship, life skills, career exploration, and community caring. Youth will also participate in community contribution projects intended to increase their integration and sense of belonging. In addition, periodic community outings and events are organized to encourage broader collective participation of youth, parents, and community members. NxtGen staff members are selected to represent a variety of ethno-cultural backgrounds in order to model positive bi-cultural identity and cultural integration. Staff members have language skills in many of the first languages of program participants. Pre-tests are conducted near the beginning of the school year and post-tests are completed at the end of the school year. For participants who may join during the school year, pre-tests are completed at intake.

Rationale: Research indicates that after-school programming that is intentional and based on social emotional learning principles significantly increases participants' positive feelings about themselves, as well as their positive social behaviours[2]. The benefits are even great for young people that face challenges such as language or cultural barriers and may feel excluded from the mainstream[3]. Programs for youth from multiple cultures promote bonding and sharing across different groups[3]. In 2017, school populations coded as English language learners were approximately 22% and 28% for the Calgary Board of Education (CBE) and Calgary Catholic School District (CCSD) respectively[5]. Trends in the past four years show this number steadily increasing every year[4].

Indicators:
38 – Youth – Grades 7-12 – Self-Esteem, Self-Confidence, Identity

Calgary
AfterSchool

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[1] Immigrant Sector Council of Calgary. 2015. Strategic Actions for Change: Working with Children and Youth of Immigrant Families. Calgary: Immigrant Sector Council of Calgary. Pages 5-12.

[2] Cooper, Merrill. 2014. "After-school programs." Positive child and youth development. FCSS Calgary Research Brief 1. Calgary: City of Calgary, FCSS Calgary. Pages 6-7. [3] Cooper, Merrill. 2014. "Developmental programming." Positive child and youth development. FCSS Calgary Research Brief 1. Calgary: City of Calgary, FCSS Calgary. Page 4.

[3] Easter, Maud, and Dina Refki. 2004. "Creating Successful Programs for Immigrant Youth." ACT for Youth Upstate Centre of Excellence: Practice Matters (December). Ithaca, NY: Cornell University, Family Life Development Centre. Page 2. [5] Calgary Board of Education. 2017. Calgary Board of Education (CBE) Financial Review Report. Calgary: Calgary Board of Education. Page 48. Retrieved from https://education.alberta.ca/media/3739809/cbe-report_04apr18.pdf.

[4] Calgary Board of Education. 2017. Calgary Board of Education (CBE) Financial Review Report. Calgary: Calgary Board of Education. Page 49. Retrieved from https://education.alberta.ca/media/3739809/cbe-report_04apr18.pdf.

CALGARY CATHOLIC IMMIGRATION SOCIETY
- **Immigrant Seniors Integration Project**

THEORY OF CHANGE:

Need: Social isolation is defined as the objective absence or lack of contacts and interactions between an older person and a social network. Social isolation can be addressed by building positive social ties that will increase access to needed supports. Studies show that the risk of social isolation increases with age. Some of the risk factors of social isolation identified among seniors include living alone, having low income, being single, experiencing loss, experiencing language and cultural barriers and having transportation difficulties.[1] For immigrant seniors language barriers create additional social isolation. There are approximately 120,000 Calgarians aged 65 and older in 2014 which is 10 percent of the population. It is expected that this number will almost double to 225,000 in 20 years.[2] In Calgary, about 8% of seniors don't speak English or French at a conversational level, and this may impact their ability to access some services and participate in their communities.[3]

Goal: To promote and/or provide access to participation for immigrant seniors.

Strategy: The Immigrant Seniors Integration program offers programs/activities for immigrant seniors aged 55 to 94 with varying English-speaking levels. Programs are designed for seniors from variety of ethnic communities to respond to preferences for social and community engagement and supports. Services bring seniors together for multicultural events, educational workshops, and socializing activities. This offers opportunities for volunteering and leadership development. Many activities are planned in collaboration with mainstream organizations to promote reciprocal integration. Thus, our activities increase social relationships and networks to reduce social isolation and dependency. For example the Tuesday Tea brings together seniors from diverse cultures once a month for tea and conversation. After their initial meeting, they connect with each other and build friendships. Other programs such as bi-monthly multicultural events provide opportunities for ethnic and mainstream seniors to mix.

Rationale: When parties learn to be comfortable with each other, it reduces social isolation and facilitates positive social ties. Social capital is formed through network participation and social interaction in groups and programs offered by CCIS, ISIP are exemplary in demonstrating promising strategies and solutions in addressing social isolation reinforce this.[4] Furthermore, FCSS There is also evidence to support that some forms of programming, particularly when such programming is offered in partnership with or directly by organizations, can further senior engagement in the communtiy.[5]

Indicators:
4 - Positive Social Ties and/or Bonding Social Capital
6 - Social Inclusion - Social Participation

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[1] Cooper, Merrill. 2014. "Vulnerable seniors." Positive Social Ties and Vulnerable Populations. FCSS Calgary Research Brief 4, Calgary: City of Calgary, FCSS Calgary. Page 8.

[2] City of Calgary. 2015. "Calgary's Aging Population: An overview of the Changing and Aging Population in Calgary." Calgary: City of Calgary, Calgary Neighbourhoods, Strategic Services. Page 1.

[3] City of Calgary. 2015. "Calgary's Aging Population: An overview of the Changing and Aging Population in Calgary." Calgary: City of Calgary, Calgary Neighbourhoods, Strategic Services. Page 4.

[4] Bernhard, Judith K., I. Hyman, and E. Tate. 2010. "Region of Peel Immigration Discussion Paper: Meeting the Needs of Immigrants Throughout the Lifecycle." Region of Peel, Human Services. Pages 66-76.

[5] Cooper, Merrill. 2009. "Vulnerable Seniors" positive social ties and vulnerable populations. FCSS Calgary Research Brief No. 4. Calgary: City of Calgary, FCSS Calgary. Page 16.

CALGARY CATHOLIC IMMIGRATION SOCIETY
- **Regional Outreach Program**

THEORY OF CHANGE:

Need: Calgary's ethno-cultural make up is changing with increasing immigration. The City of Calgary projects that by 2020 the total immigrant population in the city will be at half a million.[1] "Migration stress has been identified as one of the major determinants of immigrant mental health."[2] Adjustment issues, lack of supports, and systemic barriers increase the risk of social exclusion[3] and "non-belonging, or social exclusion carries with it social costs."[4] Strategies that foster social participation and inclusion are integral to reducing such stressors towards overall positive adaptation and integration into the society.

Goal: To facilitate the development of stronger, inclusive communities by working with grassroots, ethno-cultural communities and service providers in the east side of Calgary.

Strategy: ROP uses community development as a broad strategy in working with grassroots, ethno-cultural communities who are at risk of social exclusion and stakeholders who can enhance inclusion. Strategies include engagement, strengths/needs assessments, collaboration, capacity building, empowerment and dialogue. ROP staff work with informal leaders/individuals to increase grassroots participation and access to services. ROP offer 3 to 4 capacity building groups per year that are 3 to 6 sessions in length; providing 2 forums for dialogue per year; and developing up to 3 initiatives to address systemic issues. Volunteers play an important role, with 45 volunteers engaged across strategies. Community development allows for a flexible approach to address the specific community need. The ROP is offered in the NE and SE areas of Calgary utilizing community space.

Rationale: Research suggests that programs that "integrate the principles of social inclusion, access and equity" increase integration.[5] AUMA acknowledges that "a strategy to build inclusion and equity is most successful when it is owned and developed by the local community, the groups in that community and the institutions that serve that community."[6] Community development provides a process to challenge and addresses social issues by empowering individuals, groups and organizations to collectively define the problem and generate solutions. Results are effective and relevant: grassroots develop leadership skills, networks, have a voice and feel included and mainstream organizations learn about/embrace diversity. The United Way claims that, "finding the most effective ways in which citizens, service delivery agencies, institutions and organizations interact and create linkages for community members is a critical component to addressing social exclusion."[7] While there is little research-based evidence on specific interventions, as noted by Cooper[8], ROP finds Community Development is one of the most effective change strategies to accomplish the above.

Indicators:
5 – Bridging Social Capital
6 – Social Inclusion – Social Participation

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[1] City of Calgary, Diversity in Calgary: Looking Forward to 2020. Website.
https://www.calgary.ca/CSPS/CNS/Documents/Social-research-policy-and resources/diversity-in-Calgary.pdf?noredirect=1
[2] Y. L. R. Wong, J. P. Wong, and K. P. Fung, "Mental health promotion through empowerment and community capacity building among East and Southeast Asian immigrant and refugee women," Canadian Issues: Immigrant Mental Health, pp. 108–113, 2010.
[3] Cooper, Merrill. 2014. "Vulnerable immigrants." Positive Social Ties and Vulnerable Populations. FCSS Calgary Research Brief 4, Calgary: City of Calgary, FCSS Calgary, Page 4
[4] Reitz et al, Canadian Institute for Research on Public Policy, p. 21, 2009
[5] Y. L. R. Wong, J. P. Wong, and K. P. Fung. 2010."Mental health promotion through empowerment and community capacity building among East and SouthEast Asian immigrant and refugee women," Canadian Issues: Immigrant Mental Health, pp. 108–113.
[6] Alberta Urban Municipalities Association. 2014. Welcoming & Inclusive Communities Toolkit. p.19
[7] Government of Canada's Policy Research Initiative. 2005. Social Capital: A tool for Public Policy. Website:
http://publications.gc.ca/collections/Collection/PH4-29-2005E.pdf.
[8] Cooper, Merrill. 2014. "Vulnerable immigrants." Positive Social Ties and Vulnerable Populations. FCSS Calgary Research Brief 4, Calgary: City of Calgary, FCSS Calgary, Page 4.

CALGARY CATHOLIC IMMIGRATION SOCIETY

- **Volunteer Resources and Development**

THEORY OF CHANGE:

Need: Canada accepted 28,100 refugees in 2018 and aims to increase that number to 29,950 in 2019[1]. Refugees are selected through humanitarian programs[2], which focus on vulnerable individuals with high need for personal support. Full economic participation is a challenge for refugees and educated immigrants. Unemployment for those who landed 5 years ago or less remains at 9.4 per cent[3]. These trends impact Alberta, where international migration contributed to half of the province's growth in 2018[4], and 20,956 immigrants in the first 6 months of 2019[5].

Goal: Assist new refugees and immigrants gain social capital and improve economic inclusion for successful integration into the Calgary community.

Strategy: The program targets newcomers with various skill levels and settlement needs. The model relies on recruitment, training, skill development, and engagement of clients as volunteers. Recruitment takes place through group presentations to clients, traditional and online communication channels, and referrals from partners. The aim is to engage clients in volunteer placements that are suited to their unique skill sets and settlement goals. The program ensures the quality of the volunteer experience by adhering to volunteer management best practices to maximize the impact. The program cycle is continuous and volunteer engagement is reviewed regularly to ensure alignment with program strategy and emerging issues. One trend is the increased need for volunteer development, especially in the acquisition of suitable skills to work with refugees with increasingly diverse and challenging settlement needs, and the development of life skills and employment skills for these clients.

Rationale: Research shows recent immigrants and refugees are amongst the groups most vulnerable to social exclusion, with most immigrants meeting more than one criteria for vulnerability. Findings also suggest a strong connection between robust social networks, social and economic outcomes, and immigrants' perceptions of their life in Canada[6]. Evidence further show that volunteer associations beyond ethno-cultural communities can contribute to the development of bridging social capital, knowledge and skills enhancement, and entry into the Canadian labour market[6]. We believe creating volunteer opportunities for community and workforce participation can prevent social exclusion and contribute to a successful settlement experience by helping our immigrants and refugee clients to gain social capital and work towards achieving self-sufficiency[7].

Indicators:
6 – Social Inclusion – Social Participation
8 – Social Inclusion – Economic Participation; Education & Training / Employment / Income

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[1] Markusoff, J. Jan. 23, 2019. "Canada now brings in more refugees than the U.S." Maclean's. Online Access. https://www.macleans.ca/news/canada/refugee-resettlement-canada/

[2] @ReporterTeresa. June 20, 2019. "Hussen says he wants Canada to accept more refugees as economic immigrants". The Canadian Press. Online Access. https://calgaryherald.com/pmn/news-pmn/canada-news-pmn/hussen-says-he-wants-canada-to-accept-more-refugees-as-economic-immigrants/wcm/c1674fa4-b692-4953-bc7b-af1c04997d87

[3] Statistics Canada. 2019. "Labour force characteristics by immigrant status, annual." Website. https://www150.statcan.gc.ca/t1/tbl1/en/tv.action?pid=1410008301

[4] Statistics Canada. 2018. "Analysis: Total Population." Website. https://www150.statcan.gc.ca/n1/pub/91-215-x/2018001/sec1-eng.htm

[5] Statistics Canada. 2019. "Estimates of the components of international migration, quarterly." Website. https://www150.statcan.gc.ca/t1/tbl1/en/tv.action?pid=1710004001&pickMembers%5B0%5D=1.10

[6] Cooper, Merrill. 2014. "Vulnerable immigrants." Positive social ties and vulnerable populations. FCSS Calgary Research Brief 4. Calgary: City of Calgary, FCSS Calgary. Pages 3.

[7] Cooper, Merrill. 2014. "What needs to be prevented." Individual and family economic self-sufficiency. FCSS Calgary Research Brief 3. Calgary: City of Calgary, FCSS Calgary. Pages 2 - 3.

CALGARY CHINESE ELDERLY CITIZENS' ASSOCIATION, THE

- **Chinese Community Helpers Program**

Revised 2018 June 18

THEORY OF CHANGE:

Need: Almost one in five Calgary seniors (16,000 people) were part of a visible minority group and of these, 42 per cent were Chinese. Chinese is Calgary's largest visible minority group with an estimated population of 100,000; slightly over 10 per cent are seniors.[1] Risk factors for social isolation among seniors include age of over 75 years, low income, living alone, health problems, grief and loss, and language or cultural barriers.[2] Close to one in four of Chinese elderly immigrants report depressive symptoms, much higher than the reported 10 to 15 per cent in the elderly Canadian population generally.[3]

Goal: To increase peer support and positive social ties among Chinese older adults.

Strategy: Canadian Mental Health Association (CMHA) and CCECA adapt and translate materials and choose trainers from among staff. The trainers organize focus groups and workshops on mental health and aging, the purpose of which is to recruit community helpers, age 50 and over. The helpers then attend training covering topics such as mental health, grief and loss, self-help skills and mindfulness, stress management, goal setting, helping skills and healthy relationships. Sixteen helpers are trained annually. Once trained, the helpers provide one-to-one support to participants over age 65 who express feelings of isolation, live alone, have low income, and experience poor physical and/or mental health. The pairs meet in person and/or by telephone once per week for 10 weeks for an hour per session. The helpers offer shared experience, emotional support, active listening and respect, and help seniors establish goals such as better self-care, social engagement and feelings of improved mental health and wellness. They link seniors to formal services when appropriate. The program coordinator leads a monthly support group within the 10 weeks to help build strong, supportive and sustainable social connections.

Rationale: Informal networks and social supports are especially important to the mental health of immigrants and refugees.[4] The community helpers program is based on "Natural Helpers", a peer helping program used successfully in thousands of communities in many countries. The underlying philosophy of the program is that "in every community there are people to whom others naturally turn when they need help. The one thing that they have in common is that they are considered by others to be helpers."[5] In a mental health peer support program for older adults in Kansas, participants showed significant improvement for depression and quality of life indicators for health, and functioning improved for participants with symptoms depression and anxiety.[6]

Indicators:
4 - Positive Social Ties and/or Bonding Social Capital

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[1] Community & Neighbourhood Services, Social Policy & Planning Division. 2009. "Facts about Calgary seniors." Calgary: City of Calgary. Page 3.
[2] Cooper, Merrill. 2014. "Vulnerable seniors." Positive social ties and vulnerable populations. FCSS Calgary Research Brief 4. Calgary: City of Calgary, FCSS Calgary. Page 8.
[3] Lai, DW. 2004. "Depression among elderly Chinese-Canadian immigrants from Mainland China." Chinese Medical Journal 117.5(2004): 677-683.
[4] Cooper, Merrill. 2014. "The Issue." Positive social ties and vulnerable populations. FCSS Calgary Research Brief 4. Calgary: City of Calgary, FCSS Calgary. Page 1.
[5] Redekopp, Dave and P. Austen. 1993. "Community Helpers–A Program Guide." Edmonton: Centre for Career Development Innovation, Concordia College. Page 1.
[6] R. K. Chapin. 2013. "Reclaiming joy.: Pilot evaluation of a mental health peer support program for older adults who receive Medicaid." The Gerontologist 53(2): 345-352.

CALGARY CHINESE ELDERLY CITIZENS' ASSOCIATION, THE
- **Support Programs**

THEORY OF CHANGE:

Need: In 2017, 11 per cent of Calgary's population was aged 65 or older, with a 23 per cent population increase projected to occur by 2022. The population aged 75 or older is expected to grow by 14 per cent during the same period. Risk factors associated with social isolation among seniors include age over 75, low income, living alone, health or mobility difficulties, and language or cultural barriers. Currently, 26 per cent of Calgary seniors live alone and almost 40 per cent of unattached Calgary seniors live in poverty.[1]

Goal: To promote social connections and reduce social isolation among seniors by providing programs and services that are accessible, affordable, and account for health, mobility and cultural considerations. Seniors programs are intended to promote and enable physical, mental, and social engagement within the community.

Strategy: Social connectedness is associated with better physical and mental health, quality of life, and longer life.[2] Seniors centres across the city offer social, educational, recreational, and leisure programs and activities for seniors aged 65 and older. Programs are coordinated by trained staff and, where possible, are designed with local seniors to respond to preferences for social and community engagement and supports; provide physical activity and recreation for seniors of diverse interests and abilities; and create an inviting and inclusive space for connecting to important community supports for seniors. Programming is ongoing and flexible to respond to needs and interests as they are identified. Centres are open year-round on weekdays, as well as some Saturdays and some evenings to host monthly or bi-weekly socials or special events.

Rationale: Social isolation in the seniors' population can be prevented and reduced by enhancing protective factors such as social ties (including with younger friends and neighbours), good health, creative expression, and communication skills. Community engagement can be facilitated with accessible services, access to transportation, and opportunities to take up meaningful roles in society.[3] Programs that capitalize on seniors' experiential knowledge and affirm and enable opportunities for reciprocity, feeling valued, and making meaningful contributions contain the psychological preconditions for building social ties. Best practices include group programs with an educational or training component, intergenerational programs, gatekeeper programs, volunteer opportunities, and targeted social or support activities, which can be tailored to participant health and activity limitations.[4] Programs should be facilitated by quality trained staff and enable participant involvement in program design, implementation, and review.[5]

Indicators:
4 – Positive Social Ties and/or Bonding Social Capital

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[1] The City of Calgary, Calgary & Region Economic Outlook, Spring, 2018.
[2] Austin, C., R. McClelland, J. Sieppert, and E. Perrault. n.d. The Elder Friendly Communities Project: Understanding Community Development and Service Coordination to Enhance Seniors' Quality of Life. Calgary: University of Calgary, Faculty of Social Work. Page 20.
[3] Edwards, P., and A. Mawani. 2006. Healthy Aging in Canada: A New Vision, A Vital Investment from Evidence to Action. Ottawa: Federal/Provincial/Territorial Committee of Officials (Seniors), Healthy Aging and Wellness Working Group. Pages 17-18.
[4] Cooper, Merrill. 2009. "Vulnerable Seniors." Outcome: Positive Social Ties and Vulnerable Populations. FCSS Calgary Research Brief No. 4. Calgary: City of Calgary, FCSS Calgary. Pages 12-15.
[5] Cattan, M., M. White, J. Bond, and A. Learmouth. 2005. "Preventing Social Isolation and Loneliness among Older People: A Systematic Review of Health Promotion Interventions." Ageing and Society 25: 41-67. Pages 57 and 61.

CALGARY CHINESE ELDERLY CITIZENS' ASSOCIATION, THE
- **The Way In Program: Older Adult Outreach**

THEORY OF CHANGE:

Need: Vulnerable older adults in Calgary are faced with diverse resources to assist with physical and mental health, housing, home maintenance, finances, transportation, legal rights, and safety. Programs also provide opportunities for learning, contributing to their community, and social interaction. Aging, low income, low education, and language or cultural barriers are associated with social isolation.[1] Access to services and resources help to improve social inclusion, economic self-sufficiency, and community participation.[2]

Goal: To increase social connections and access to supports and resources for vulnerable older adults.

Strategy: The Way In Program consists of a network of four service providers: Calgary Chinese Elderly Citizens' Association, Calgary Seniors' Resource Society, carya, and Jewish Family Services. Each offers community-based outreach support to older adults across Calgary, including services for specific ethno-cultural groups. Services include assessment; information, referral and connection to resources; assistance with applications for benefits; supportive counselling; case management; advocacy; group activities and workshops; caregiver/ family support; connection to social and cultural programs; and elder abuse intervention in coordination with other community services. Program staff provide centralized access and standardized services, evaluation, coordination, and cultural competency to seniors across the city. Program involvement ranges from six to ten months.

Rationale: When vulnerable older adults "know people to turn to for resources, support, and connections, it helps them to get by or get ahead."[3] The lack of clarity about social isolation in older adults makes defining effective interventions difficult.[4] Research testing a clear definition of the concept and The Way In Network's program focus indicates interventions improved four of six dimensions of social isolation: access to resources; number of acquaintances; feeling supported; and belonging to community.[5] An evaluation of the Way In Program showed 97 per cent of its case management clients obtained the services they were seeking through the referral process provided by the program.[6]

Indicators:
#15 – Long-Term Decreased Expenses; Increased Income from Sources other than Employment
#16 – Poverty Reduction – Emergency / Short-Term Help

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[1] Nicholson, Nicholas R. 2012. "A Review of Social Isolation: An Important but Under-assessed Condition in Older Adults." The Journal of Primary Prevention 33(2):137-152.

[2] Cooper, Merrill. 2014. "Vulnerable seniors." Positive social ties and vulnerable populations. FCSS Calgary Research Brief 4. Calgary: City of Calgary, FCSS Calgary. Page 8.

[3] Cooper, Merrill. 2014. "The issue." Positive social ties and vulnerable populations. FCSS Calgary Research Brief 4. Calgary: City of Calgary, FCSS Calgary. Page 1.

[4] Nicholson, Nicholas R. 2009. "Social isolation in older adults: an evolutionary concept analysis." Journal of Advanced Nursing 65(6): 1342-1352.

[5] DesCamp, E., J. Hewson et al. 2014. "Reducing Social Isolation in Older Adults Living in Community." Presentation. American Society on Aging Conference. March 14, 2014. San Diego, CA. Page 4.

[6] Gardiner, H., and Associates, Inc. 2010. Evaluation of the Older Adult Outreach and Senior Support Programs. Presentation. Alberta College of Social Workers Conference. March 19, 2010. Edmonton, AB. Page 62.

CALGARY COMMUNITIES AGAINST SEXUAL ABUSE SOCIETY
- **Who Do You Tell? & Birch Grove**

THEORY OF CHANGE:

Need: The most extensive study of child sexual abuse in Canada reported that 54 per cent of girls and 31 per cent of boys under the age of 21 had experienced sexual abuse.[1] Adult survivors often experience depression,[2] social isolation, and chronic health problems,[3] and are 10 times more likely to commit suicide.[4] Females are more likely to return to an abusive partner and experience sexual assault later in life.[5] Prevention strategies are critical to changing this pattern.

Goal: To provide elementary school children with the skills and knowledge needed to recognize abusive behaviours, promote healthy relationships, and access support in order to reduce the impacts of sexual violence.

Strategy: Who Do You Tell?™ uses age appropriate content and materials to discuss positive, respectful relationships and develop an enhanced ability to access support from a trusted adult. It is delivered by skilled educators who model respectful behaviour, employ interactive instructional techniques, and provide multiple sessions to improve retention. The program includes educational sessions for parents and teachers within the school as well as continuous evaluation. It is offered in eight to 10 schools per year over nine to 12 weeks. The program's educators typically deliver 16 one-hour sessions to children during a week. They also spend three hours of private time with children, five hours liaising with school personnel and other professionals, and four hours doing paperwork and parent/child welfare follow-up and meetings in office.

Rationale: Best practice research confirms that effective early intervention programs take a whole school approach;[6] build knowledge and skills, repeat important concepts, and are interactive and participatory.[7] They foster healthy and positive behaviours, and promote and respond appropriately to participants' disclosures.[8]

Indicators:
45 – Child Abuse Prevention (multi-site school-based programs)

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[1] Badgley, R. 1984. Sexual Offences against Children in Canada: Summary. Report of the Committee on Sexual Offences against Children and Youth, Vol. 1. Ottawa: Supply and Service Canada. Page 1.

[2] Hill, J., R. Davis, M. Byatt et al. 2000. "Child sexual abuse and affective symptoms in women: a general population study." Psychological Medicine 30(6): 1283-1291.

[3] Trickett, Penelope, Frank Putnam, and Jennie Noll. 2005. "Longitudinal Study on Childhood Sexual Abuse." Cincinnati: Cincinnati Children's Hospital Medical Centre. Website.

[4] Martin, Graham, Helen Bergen et al. 2004. "Sexual abuse and suicidality: Gender differences in a large community sample of adolescents." Child Abuse and Neglect 28: 491-503.

[5] Roodman, A.A., and G.A. Clum. 2001. "Revictimization rates and method variance: a meta-analysis." Clinical Psychology Review 21(2): 183-204.

[6] Wells, L., C. Claussen, R. Abboud, and M. Pauls. 2012. Developing a strategic and coordinated community approach to violence prevention programming for children and youth in Calgary: Phase 1 best and promising practices and program scan. Calgary: University of Calgary, Shift: The Project to End Domestic Violence. Pages 17-20.

[7] Collin-Vézina, Delphine, Isabelle Daigneault, and Martine Hébert. 2013. "Lessons learned from child sexual abuse research: prevalence, outcome, and preventive strategies." Child and Adolescent Psychiatry and Mental Health 7(22): 5-6.

[8] Wells, L., C. Claussen, D. Aubry, and J. Ofrim. 2012. Primary prevention of sexual violence: Preliminary research to support a provincial action plan. Calgary: University of Calgary, Shift: The Project to End Domestic Violence. Pages 42-47.

CALGARY COUNSELLING CENTRE
- **Family Violence Program**

THEORY OF CHANGE:

Need: In 2013, nearly half (48%) of family violence occurred by a current or former partner.[1] Among police-reported incidents of violence by a current or former partner, nearly 8 in 10 victims were female.[1] Men represent 17% of all victims of spousal violence[1]. In regards to family violence against children and youth, women were involved in 29% of all family-related physical assaults against children and youth in 2007[1]. Family violence is under-reported[1] and in many cases, formal statistics often exclude other forms of abuse, such as manipulation and misuse of power, financial abuse, sexual abuse, persistent name calling and "put downs."

Goal: To prevent, understand and change aggressive and abusive behaviour in intimate partner relationships.

Strategy: The family violence program consists of 30-hour psychotherapy groups that run over 14 weeks with each session lasting two hours; the first and last sessions are 3 hours. There are separate groups for men or women who are abusive in their intimate relationships with their partners and/or their children. The men's group is optimally offered 12 times per year and the women's group 5 times per year. Participants are invited to accept responsibility for their actions and decline invitations to participate in denial and minimization. The importance of participants learning to prevent violence, resolve disagreements, and keep arguments from escalating is also highlighted. Separate groups for the male and female victim support are optimally offered 2 or 3 times per year respectively. Each cycle is led by two facilitators, a male and a female who model healthy interaction and conflict resolution. Group participation may be voluntary or court mandated. All group participation is preceded by individualized assessments and counselling. An urgent "quick response" slot is available each day at 4:30 so that an urgent client can be seen the same day if required.

Rationale: The aim is to prevent or reduce further instances of physical violence in the home, prevent children from witnessing further violence in the family, and ultimately, to help individuals, couples, and families who are experiencing abuse in intimate relationships to live violence-free lives. The primary objective of the victims' groups is to help participants to alter their belief systems and behavioural change so that they are able to avoid abusive relationships.[2] These types of preventive programs have been demonstrated to reduce or eliminate the re-offense of abuse and violence.[3,4,5] These program requirements, delivery methods, and the groups' thematic content, draw upon a foundation of best practice research and are considered promising practice for domestic violence[6].

Indicators:
#19 – Family Cohesion – Parent / Adult Questions
#11- Safety from Domestic Violence

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[1] Statistics Canada. 2015. Family Violence in Canada: A Statistical Profile. Catalogue No. 85-224-X. Ottawa: Statistics Canada.

[2] Howells, Kevin, and Clive Hollin (eds.). 1989. Clinical approaches to violence. Hoboken, NJ: John Wiley and Sons.

[3] McGregor, M., L.M. Tutty et al. 2002. "The long term impacts of group treatment for partner abuse". Canadian Journal of Community Mental Health 21(1): 67-84.

[4] Jenkins, Alan. 1991. "Intervention with violence and abuse in families: The inadvertent perpetuation of irresponsible behavior." Australian and New Zealand Journal of Family Therapy 12(4): 186-195.

[5] Gondolf, E., and Russell, D. 1986. "The case against anger control treatment programs for batterers." Response to the Victimization of Women and Children 9(3): 2-5.

[6] Buckle,L,Simpson,B, Berger,S;Metcalfe,R. Prevention and Early Intervention for Domestic Violence. June 2014.

CALGARY COUNSELLING CENTRE
- **Responsible Choices for Children and Families Program**

THEORY OF CHANGE:

Need: The Responsible Choices for Children and Parents Program was developed in response to a community need for violence prevention programs and counselling to address aggressive behaviour in children. Children's behaviours are often affected by what is occurring in the family and many of the children referred to the program have experienced traumatic events. The program is for children who have difficulty managing their emotions, navigating social relationships, and exercising self-regulation.[1]

Goal: To prevent and reduce acting out behaviours and depression in children and to increase attachment, support, coping, self-regulation strategies, and hardiness in families.

Strategy: The program is for children aged three to 17 who present with a behavioural, social, or emotional issue or who are referred by health care professionals, schools, or family services. It aims to decrease aggressive or abusive behaviours and reduce parenting stress. Children are taught skills to help them manage their behaviour, as well as their personal, family, and school challenges. At least one parent must attend a concurrent parent's program for a child to participate in the program. These teach parents self-care, how to contain their child's aggression, how to uphold and model pro-social beliefs and behaviours, and how to structure the family environment to reduce chaos and promote a calm, nurturing environment. Change can occur within all parts of the family system so all family members are encouraged to participate. Group participation is preceded by play therapy and family or individual counselling. The program is generally offered three times per year for 10 consecutive weeks, with four to six groups per cycle. It is supported by master's level counsellors, students, and volunteers.

Rationale: Childhood behaviour problems, if not addressed, are associated with negative outcomes in adolescence such as criminal involvement, poor academic achievement, and decreased likelihood of completing school.[2] The program requirements, delivery methods, and the group's thematic content draw upon a foundation of best practice research.[3] Since the child is part of a system that is not working as well as it could be, change must occur in within the system itself.[4]

Indicators:
19 – Family Cohesion – Parent / Adult Questions
34 – Children – Grades 4-6 – Self-Esteem, Self-Confidence, Optimism

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[1] Wolfe, L. 2002. Responsible Choices for Children & Parents Program Conspectus. Calgary: Calgary Counselling Centre. Page 10.

[2] Cooper, Merrill. 2014. "The issue." Positive parenting and family functioning. FCSS Calgary Research Brief 2. Calgary: City of Calgary, FCSS Calgary. Page 2.

[3] Cavell, Timothy. A. 2000. Working With Parents of Aggressive Children: A Practitioner's Guide. Washington: American Psychology Association. Pages 159, 177, 183, and 194.

[4] Wright, Lorraine, and Maureen Leahey. 2012. Nurses and Families: A Guide to Family Assessment and Intervention. 6th ed. Philadelphia: F.A. Davis Company. Page 38.

CALGARY DROP-IN & REHAB CENTRE SOCIETY
- **Community Integration Program**

THEORY OF CHANGE:

Need: Without opportunities for vulnerable Calgarians to create diverse social connections and have direct links to resources, it is near impossible to remain in housing.[1] For people experiencing homelessness, this challenge is inevitably greater. Homelessness is often accompanied with addictions, mental illness, health care needs, poverty and experiences of violence.[2] This disparity of resources can exclude an individual from the quality of life, connection to services and community activities compared to an average person[3] and inhibits vulnerable Calgarians ability to return to and remain in housing.

Goal: To promote life skills, social inclusion, participation and connection to community for individuals moving back into housing from their experience of homelessness.

Strategy: The Calgary Drop-In Centre (the DI's) Community Integration Program provides three levers of support for vulnerable Calgarians aged 18 and up who are transitioning back into housing from their experience of homelessness. The three levers of support are free goods programs' - computers, clothing store and household goods - individualized case management and community inclusion programming.

First, the Free Goods Program – made possible by the generous donations of kitchenware, furniture and clothing items – is an integral transitional resource that immediately connects people moving back into housing to a community service with access to the household goods needed to make their house a home. Second, individualized case management programming provides direct transitional care and life skills development like the use of kitchen appliances and linking them to community resources like Alberta Health Care Services. The third lever, community inclusion programming, aims to further develop social inclusion through weekly community activities that range from communal cooking to educational sessions. Tenants are encouraged to participate in the design and implementation of these activities, to volunteer and to provide peer to peer mentorship. Tenants gain new skills, share their existing skills and build self-esteem to remove the barriers of social exclusion and isolation.

Rationale: When people feel socially included, they are proven to be more successful in maintaining their housing[4]. According to a study published in the Canadian Journal of Public Health, of those individuals who depart shelter living with a lack of social supports, almost 40% return to shelter within the first year.[5] Compared to the DI's Community Integration Program that provides free goods, individualized case management and community inclusion to vulnerable Calgarians transitioning out of shelter, only 2% return to shelter within the same time frame. We believe this combination is necessary when adjusting to independent living which in turn leads to people living more happy, healthy and housed.

Indicators:
 # 7 – Social Inclusion – Participation in Neighbourhood

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[1] FCSS Research Brief 4 (2014). Positive social ties and vulnerable populations. P.1
[2] Calgary Recovery Services Task Force. Final Report and Recommendations. 2016/2017. http://calgarychh.ca/wp-content/uploads/2018/09/Calgary_Recovery_Services_Task_Force_Report.pdf p. 5-14.
[3] FCSS Research Brief 4 (2014). Positive social ties and vulnerable populations. P.1
[4] FCSS Research Brief 4 (2014). Positive social ties and vulnerable populations. P.1
[5] Duchesne, A. and Rothwell, D. (2016). What leads to homeless shelter re-entry? An exploration of the psychosocial, health, contextual and demographic factors. *Canadian Journal of Public Health*, 107(1), pp.e94-e99.

CALGARY DROP-IN & REHAB CENTRE SOCIETY
- **Participation and Integration into the Community (PIC) Program**

THEORY OF CHANGE:

Need: For people who live in poverty, transportation access to services such as medical or other professional appointments, as well as employment opportunities can be difficult. For individuals and families who live in poverty, lack of transportation can be a significant barrier[1].

Goal: The PIC program has the goal of providing transit tickets to agencies who are focused on providing opportunities to individuals to participate in making communities strong, increase their social inclusion and accessing services they require.

Strategy: The Calgary Drop-In Centre (the DI) is the broker for the PIC program on behalf of the City of Calgary, distributing transit tickets to participating social services agencies. Each participating agency is responsible to qualify for the program and provide their clients with transit tickets when needed. Agencies are responsible to report to the DI the different services that clients required transit tickets for (employment, housing, medical, etc). This information is given to the City of Calgary in an Annual Report.

Rationale: By providing transit tickets to participating social service agencies, the PIC program is able to support the most vulnerable individuals in Calgary as they access services they require, in addition to participating as citizens of Calgary.

Indicators:
Outputs Only

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[1] Vibrant Communities Calgary. (2019). A Snapshot of Povery in Calgary 2019.

CALGARY IMMIGRANT WOMEN'S ASSOCIATION
- **Filipino Community Development Program**

THEORY OF CHANGE:

Need: Calgary is home to over 50,000 Filipinos, the fourth largest Filipino community in Canada. 2016 Census Profile reports 23,170 recent Filipino immigrants.[1] According to Embassy of the Philippines in Ottawa, the Philippines continues to be the top source of immigrants to the country.[2] "Over 8.2 million Filipinos work abroad.[3] Over 9 million Filipino children have at least one migrant parent."[4] Recent immigration policy changes provide an opportunity for Filipino families to reunify in Canada. The reunified family members typically have unstable relationships due to separation, which results in significant challenges.[5] FCDP provides transitional support that helps alleviate the intersecting barriers of reunification stressors and socio-economic challenges in Filipino families.

Goal: To support Filipino families who are currently separated or are recently reunited to enhance family cohesion and social inclusion

Strategy: The program uses a customized approach depending on the family's needs. Families who have been recently reunited can access a variety of workshops, supportive counseling, in-home support, cross cultural parenting sessions, networking initiatives, volunteer opportunities and referrals to youth programs. The program offers 14, two-hour group or individual sessions, which are held weekly or monthly over a period of 4 months. Parents preparing for the arrival of their spouse and/or children are provided ongoing first language support, supportive counseling, cross-community engagement and networking initiatives, family and parenting reunification support, and skill building and information workshops to address settlement related issues. Parents attend five individual or groups sessions that run for an average of 1-2 hours over a period of three months.

Rationale: The program uses strategies that are "as effective in preventing or ameliorating the risk factors for family instability and poor parenting".[6] Studies have shown that strong parenting skills and positive relationships between parents and children require both secure attachment and sufficient positive social support.[7] Research shows that "positive parenting can buffer children from the consequences of other hardships and adversity in life."[8] Additionally, positive parenting, family functioning and child outcomes dramatically improve when social isolation is reduced.[9] "Social networks serve as a buffer to the stress experienced by family separation and reunification" and "is critical for giving guidance, sharing experiences, and empowering newcomers to meet challenges."[10]

Indicators:
4 – Positive Social Ties and/or Bonding Social Capital
19 – Family Cohesion – Parent / Adult Questions
20 – Parenting – Parent Questions

[1] https://www12.statcan.gc.ca/census-recensement/2016/dp-
[2] Republic of the Philippines, Embassy of the Philippines, Ottawa, Canada census May 2016.
https://ottawape.dfa.gov.ph/index.php/2016-04-12-08-34-55/filipino-
diaspora#targetText=There%20are%20837%2C130%20people%20in,census%20conducted%20in%20May%2C%202016.
&targetText=The%20Philippines%20continues%20to%20be,%2C%20and%20Iran%20(42%2C070).
[3] Republic of the Philippines, Embassy of the Philippines, Ottawa, Canada census 2011-2016.
[4] Go 2012; Ruiz 2008; Weekley 2006
[5] Tate, E. 2011. Family Separation and Reunification of Newcomers in Toronto: What does the literature say? Toronto: Toronto Public Health. Page 4.
[6] Cooper, Merrill. 2014. "The issue." Positive parenting and family functioning. FCSS Calgary Research Brief 2. Calgary: City of Calgary, FCSS Calgary. Page 8, 12-13
[7] FCSS Calgary Research Brief 4 June 2009 Outcome: Positive social ties and vulnerable populations Page 1.
[8] Cooper, Merrill. 2014. "The issue." Positive parenting and family functioning. FCSS Calgary Research Brief 2. Calgary: City of Calgary, FCSS Calgary. Page 1.
[9] Cooper, Merrill. 2014. "Social isolation." Positive parenting and family functioning. FCSS Calgary Research Brief 2. Calgary: City of Calgary, FCSS Calgary. Page 8.
[10] Tate, E. 2011. Family Separation and Reunification of Newcomers in Toronto: What does the literature say? Toronto: Toronto Public Health. Page 6.

CALGARY IMMIGRANT WOMEN'S ASSOCIATION
- **Volunteer Program**

THEORY OF CHANGE:

Need: Calgary is home to immigrants between the working ages of 25 and 44 years. According to Statistics Canada, Calgary's immigrant population is expected to grow from 22 per cent to 38 per cent between 2006 and 2031. Based on the average rate of growth for the last three Federal Census cycles the visible minority population is projected to reach upwards of 40 per cent in Calgary by 2020.[1] Struggles in the Canadian Labour market include lack of credential recognition, official language skills and work experience.[2]

Goal: To enhance the social inclusion and participation of immigrant women and strengthen our neighborhoods through meaningful volunteer opportunities.

Strategy: The program provides volunteer engagement opportunities for different age groups. Positive relationships between clients and both immigrant and mainstream volunteers are supported through mentoring opportunities with youth and seniors. Opportunities are provided for volunteers to develop positive relationships with their peers
The program enhances the capacity of volunteers by providing monthly orientation sessions for new volunteers, interpretation training, facilitator training, youth mentorship training, and skills enhancement training. Volunteers are also able to engage in the community through attending arts and crafts sales and providing assistance to other organizations in need of volunteers.

Rationale: Involvement in organizations, community groups and/or charitable organizations, individuals in a society can create the bridging, bonding and linking social capital necessary to ensure safe, sustainable and vibrant communities.[3] Bridging social capital is "associated with assisting people in obtaining employment and increasing income"[4] and social inclusion is achieved by increasing overall civic participation, where participation includes volunteering as well as membership in community and charitable organizations. [5]"Research shows that when vulnerable or marginalized populations - immigrants and refugees, are socially excluded from civic participation through volunteer experiences they are further disadvantaged by not experiencing the benefits of increased social capital, social networks, skills and contact.[6] Through "meaningful volunteer opportunities, immigrants can make a significant contribution to their community, develop new skills, and prepare to assume leadership roles within their communities".[7] "For many adult newcomers, NGO's and settlement agencies are the first point of contact in building relationships & developing social networks".[8]

Indicators:
5 – Bridging Social Capital
6 – Social Inclusion – Social Participation

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[1] https://www.calgary.ca/CSPS/CNS/Documents/Social-research-policy-and-resources/diversity-in-Calgary.pdf
[2] Larose, G. and Tillman, G. 2009. Valorizing Immigrants' Non-Canadian Work Experience.
Ottawa: Canadian Council on Learning.
Online: http://www.ccl-cca.ca/pdfs/WLKC/WLKC_Valorizing_EN.pdf.
[3] Anne Miller et. al. 2011. Understanding the Role of Volunteerism in Creating Social Inclusion. Brenda J Simpson and Associates
[4] Cooper, Merrill. 2009. "Vulnerable Immigrants." Outcome: Positive social ties and vulnerable populations. FCSS Calgary Research Brief No. 4. Calgary: FCSS Calgary. Pages 2-3.
[5] Anne Miller et. al. 2011. Understanding the Role of Volunteerism in Creating Social Inclusion. Brenda J Simpson and Associates
[6] Anne Miller et. al. 2011. Understanding the Role of Volunteerism in Creating Social Inclusion. Brenda J Simpson and Associates
[7] Ksienski, Hadassah. 2004. Enhancing Volunteer Participation with the Ethno-cultural Community. Edmonton: The Muttart Foundation. Page 10
[8] Geraldine Pratt, "Deskilling Across the Generations" Reunification Among Transnational Filipino Families in Vancouver", 2008

CALGARY IMMIGRANT WOMEN'S ASSOCIATION
- **Youth Program**

THEORY OF CHANGE:

Need: About 2.2 million children are foreign born or have at least one foreign born parent.[1] Young immigrants face linguistic barriers, cultural shock, and challenges settling in at new schools, which can lead to depression, isolation and anxiety.[2] The City of Calgary & FCSS have identified immigrant youth as vulnerable population which is more likely to confront barriers to effective settlement. These challenges & barriers are multifold as youth balance family, cultural and religious expectations with integration into Canadian society. When coupled with low-income status this has a multiplying effect, negatively impacting their ability to cope. As a result, female immigrant youth in particular feel "othered and devalued."[3] Also, refugee youth have experienced traumatic or unpredictable relationships; often develop protective mechanisms as a barrier to forming close personal relationships.[4,5]

Goal: To increase the social inclusion of immigrant females aged 10 to 19 by building individual capacity, increasing positive social ties, and improving emotional well-being and social competence.

Strategy: The program supports the social inclusion of immigrant girls through school based group programs, customized individual counseling support, summer camp programs, Youth Standing Committees, mentoring opportunities, intergenerational & civic engagement activities, & tutoring/homework support. Youth learn how to engage civically in the community & develop leadership skills through public speaking & organizing a variety of activities. Mentoring opportunities build positive relationships with adult role models & encourage participants to mentor immigrant youth in their schools & community. Tutoring/homework support is available to all youth experiencing challenges with schoolwork. Customized individual counselling support is offered to parents & youth on issues related to health, family relationships, parenting, self-identity & school.

Rationale: The most potent protective factors for vulnerable teens include positive relationships in key settings & connectedness to people at school & in their families.[6,7] Leadership programs increase self-esteem, communication skills, & inter-personal skills, all of which are very helpful to isolated children & youth to make connections with peers & adults.[8] Research shows that immigrant student mentorship programs, help build social skills & positive social ties for both the mentor & the mentee.[9] Volunteering & other opportunities in the community can help vulnerable youth achieve their long-term goals/aspirations, build a sense of competence & self-worth.[10] Academic engagement, self-confidence & improved academic behavior are achieved through afterschool tutoring support.[11]

Indicators:
24 - Children-Grades 4-6- Positive Friendships/Social Skills
28 - Youth-Grades 7-12-Friendships
37 - Children-Gardes 4-6-Sense of Belonging
40 - Youth – Grades 7-12 – Sense of Belonging

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[1] https://www12.statcan.gc.ca/census-recensement/2016/as-sa/98-200-x/2016015/98-200-x2016015-eng.cfm
[2] Canadian immigrant http://canadianimmigrant.ca/guides/welcome-to-canada/overcoming-the-challenges-of-immigrating
[3] Berman, H., G.A. Mulcahy, C. Forchuk et al. 2009. "Uprooted and Displaced: A Critical Narrative Study of Homeless, Aboriginal, and Newcomer Girls in Canada."
[4] Samuels, G. M. (2008). A reason, a season, or a lifetime: Relational permanence among young adults with foster care backgrounds.
[5] Munson, M.R. Brown, S. Spencer, R. Edguer, M. Tracy, E. (2015). Supportive Relationships Among Former System Youth with Mental Health Challenges. Journal of Adolescent Research.
[6] (www.mcs.bc.ca_pdf_vulnerable_youth_report)
[7] https://uwaterloo.ca/healthy-communities-research-network/projects/canadian-summer-camp-research-project
[8] American Youth Policy Forum. 1999. More things that do make a difference for youth: A compendium of evaluations of youth programs and practices. Vol. II.
[9] FCSS Calgary Research Brief No.4, Positive child and youth development
[10] www.mcs.bc.ca_pdf_vulnerable_youth_report
[11] http://repository.usfca.edu/cgi/viewcontent.cgi?article=1228&context=diss

CALGARY JOHN HOWARD SOCIETY, THE
- **Kisisskstaki Ikamotaan**

THEORY OF CHANGE:

Need: Because of the socio-psychological impacts of intergenerational trauma, Indigenous youth are at high risk for low education, incarceration, addictions, poverty, and poor health.[1] Indigenous youth face unique, complex social challenges that stem from suppressed culture, identity, and spirituality. Indigenous youth suicide rates are 5 to 6 times higher than non-Indigenous youth.[2] The Indigenous population in Calgary is younger than the general population; while the median age in Calgary is 36, the median age of Indigenous people in Calgary is 28. Aboriginal youth continue to be over-represented in the correctional system. In 2015/2016, 54% of Aboriginal youth admitted to correctional services were admitted to custody whereas non-Aboriginal youth was 44%[3].

Goal: To help Indigenous youth gain a strong sense of identity, be connected with and contributing to their Indigenous community and live a positive lifestyle that prevents their involvement in crime.

Strategy: Yearly, up to 30 Indigenous youth in Calgary aged 12 to 24 criminally involved youth will receive support, through a one-on-one relationship with an Outreach Youth Advocate (YA) or group activities led by Elders. Over six to twelve months, youth meet weekly the YA to develop and implement individualized service plans around the four life areas of the Circle of Courage to address risk factors. These strategies support youths' protective factors are trauma informed and are grounded in the Natural Supports Practice Framework. Client-centered case management with a focus on connecting with Indigenous culture is offered, helping youth work toward self-reliance and formulate achievable goals. Along with the Cultural Liaison, the YA organizes bi-weekly events to introduce cultural activities, build connections with community volunteers and build client relationships with all staff in response to staff transition and client disengagement. Our three Elders provide cultural teaching on a bi-monthly basis through these group meetings which may include the youth's natural supports.

Rationale: Ksisskstaki Ikamotaan promotes social inclusion through healing practices by utilizing youthful, accomplished staff, building resilience through a sense of identity and belonging, connecting to community, self-determination, connecting to adults as role models and exposure to traditional and contemporary cultural activities.[4] We offer direct and intentional, hands-on healing strategies that address the trauma[5] as a root cause of the barriers that Indigenous youth experience by integrating trauma informed approaches to support their healing journey[6] and help youth heal by supporting them to gain a sense of belonging, master their environments, grow their independence and learn how to practice generosity.[7]

Indicators:
38 – Grades 7-12 – Self-Esteem, Self-Confidence, Identity
50 – Sense of Cultural Belonging and Feeling Supported

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[1] Pinnow, Joanne. 2014. "Socio-psychological impacts of intergenerational trauma and trauma responses." Aboriginal brief. FCSS Calgary Research Brief 6. Calgary: City of Calgary, FCSS Calgary. Page 8.
[2] United Way Calgary and Area. Indigenous Youth Hub. https://www.calgaryunitedway.org/impact/indigenous-youth-hub
[3] https://www150.statcan.gc.ca/n1/pub/85-002-x/2017001/article/14702-eng.htm
[4] Pinnow, Joanne. 2014. "Healing Practice Theme for youth and corresponding activities cited as promising practices" Aboriginal brief. FCSS Calgary Research Brief 6. Calgary: City of Calgary, FCSS Calgary. Page 22
[5] Pinnow, Joanne. 2014. "A general framework for promising practices" Aboriginal brief. FCSS Calgary Research Brief 6. Calgary: City of Calgary, FCSS Calgary. Page 17
[6] Calgary Plan to prevent and End Youth Homelessness – 2017 Refresh, page 75.
[7] Brendtro, L., Brokenleg, M., Van Bockern, S. 1990, 2002. Reclaiming Youth At Risk: Our Hope for the Future. Bloomington. Solution Tree. page 8.

CALGARY LEGAL GUIDANCE SOCIETY

- **Social Benefits Advocacy Program**

THEORY OF CHANGE:

Need: The system of government-delivered social benefits is extremely complex and often quite challenging to navigate. For Calgarians experiencing personal and systemic poverty, violence, homelessness, addiction concerns, mental health challenges, physical health concerns, learning disabilities, language, accessing the social benefits system presents a significant challenge[1] and often adds to the trauma these Calgarians have undergone. Problems are often further exacerbated by discrimination, language, and/or literacy challenges that make it especially difficult for people defend their rights and to access the social and economic benefits to which they are entitled[2]. This is the only program in the city which provides lawyer support and professional advocacy to defend impoverished people upon benefit denial or over-payment debt.

Goal: To improve the social and economic status of more Calgarians whose social benefits have been denied or cut off.

Strategy: The Social Benefits Advocacy Program (SBAP) enhances the social and economic situation of impoverished and marginalized individuals by educating, advocating and providing legal representation to those denied or cut off benefits. This further allows individuals to obtain health benefits, receive financial services, and/or other social supports. Adults receive free legal information, advice, and assistance in dealing primarily with the AISH program (Assured Income for the Severely Handicapped) and Alberta Works. The SBAP lawyer and advocates support clients through the process of acquiring or maintaining benefits. The SBAP lawyer and advocates work collaboratively with government agents (AISH, Alberta Works) and support agencies in the city to streamline client service and avoid duplication of service.

Rationale: Low-income people experience more legal problems than average; these problems are inter-connected with social problems; the consequences are more severe; and unresolved legal problems lead to additional legal, social, and health concerns[3]. Low-income people are unable to afford private representation and access to social benefits or legal support upon denial is not offered by Legal Aid Alberta or any other service in Calgary. Nationally, about 33% of income problems, 58% of social assistance problems, 55% of disability pension problems, and 41% of housing problems are never resolved[4]. This leaves the most marginalized citizens in the cycle of poverty. The SBAP improves adult personal capital and individual economic self-sufficiency and decreases the risk of social exclusion. The majority of our clients have a disability or require social assistance and research shows that these groups are more likely to have a low income and are at higher risk for social exclusion[5]. The wrap-around, comprehensive services provided through SBAP swiftly address all the inter-related problems presented by clients and thereby prevent, or arrest, the cumulative negative spiral that so often occurs for disadvantaged people in our city.

Indicators:
#14 - Individual / Family Poverty – Perceptions
#15 - Long-term decreased expenses and/or increased income from sources other than employment

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1 Cook, D. et. al. 2011. Calgary and Region Social Outlook. Calgary: City of Calgary.
2 Calgary Neighbourhoods. 2020. Individual and family economic self-sufficiency. (Calgary, AB: Family & Community Support Services, The City of Calgary).
3 Department of Justice. (2015). An Analysis of Poverty Law Services in Canada: Part Two: Poverty law services provided by community organizations. Government of Canada.
4 Currie, A. 2005. A National Survey of the Civil Justice Problems of Low and Moderate Income Canadians: Incidence and Patterns. (Ottawa, ON: Research and Statistics Division, Department of Justice Canada).
5 Calgary Neighbourhoods. 2020. Individual and family economic self-sufficiency. (Calgary, AB: Family & Community Support Services, The City of Calgary).

CALGARY MEALS ON WHEELS
- **Home Meal Delivery Program**

THEORY OF CHANGE:

Need: Alberta's population, like the rest of Canada's, is aging. According to the City of Calgary, the senior population increased to 12.8 per cent from 2011 to 2014, a higher rate of growth than the Calgary population which increased by 9.6 per cent.[1] And while the population of elderly people is increasing, the population of younger people potentially able to care for them is decreasing proportionately.

The majority, 91 per cent,[2] of Alberta's seniors live independently in their homes and want to continue living in their communities for as long as possible. However, there is a particular risk of social isolation and malnutrition. For vulnerable seniors, social isolation is associated with poor general health including increased risk of chronic disease, reduced self care, premature death and more.[3] Malnutrition among seniors often goes unrecognized and does not always receive the attention it deserves. Seniors living alone are more prone to malnutrition as they may not enjoy eating meals alone, may make poor food choices, may not feel like cooking or may not know how to cook.[4]

Goal: To promote health and independence by providing quality, nutritious and affordable meals to people in need of our services, thereby enhancing the social safety net and preventing social isolation among clients and volunteers.

Strategy: Calgary Meals on Wheels provides healthy, locally made meals throughout the City of Calgary. Our meal service is available 365 days per year, with delivery Monday to Friday and is available to anyone, regardless of age or income, for short and/or long-term service. In addition, our program supports community by building relationships between neighbours (volunteers, clients and their families, staff and community support networks), enabling community participation and increasing social inclusion. We provide monthly written education with our meal delivery, communicating the importance of; safe and balanced meals, hydration, emergency community service contacts, fire safety and fall prevention; to clients, homecare workers and families. Through partnerships with other agencies, such as East Calgary Family Care Clinic, Alpha House, The Alex, Calgary Seniors Resource Society; we optimize our ability to reach vulnerable populations.

Rationale: Healthy eating can influence many aspects of personal health. Addressing seniors' eating and nutrition issues involves creating positive attitudes toward food, addressing issues of social connectedness and health conditions, as well as preventing food insecurity[5]. Socially isolated seniors are more at risk of negative health behaviours including being sedentary and not eating well; have a higher likelihood of falls; and, have a four-to-five times greater risk of hospitalization.[6] The services provided by Calgary Meals on Wheels provides direct solutions to food access and social isolation.

Indicator:
17 – Food Security

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[1] City of Calgary 2014 "The City of Calgary Populations Profiles – Seniors" Page 3

[2] Calgary Senior Statistics [2011 Census]

[3] Family Community Suppport Services 2014 "Positive Ties and Vulnerable Populations" Page 2

[4] Public Health Agency of Canada 2010 "The Chief Public Health Officer's Report on The State of Public Health in Canada 2010" Page 29

[5] Public Health Agency of Canada 2010 "The Chief Public Health Officer's Report on The State of Public Health in Canada 2010" Page 69

[6] Government of Canada 2013-2014 "Report on the Social Isolation of Seniors" https://www.canada.ca/en/national-seniors-council/programs/publications-reports/2014/social-isolation-seniors/page05.html

CALGARY NEIGHBOURHOODS
- **CAS, Children's and Youth Programs**

THEORY OF CHANGE:

Need: There is a strong case that what children do during non - instructional hours has a profound impact on their physical, social, emotional, and academic development. With 83 percent of Calgary's parents in the workforce, many school-aged children and youth are without adult supervision during non-school hours. Ensuring and incorporating social emotional learning skills during out of school hours is critical to supporting children and youth in emotional regulation and the prevention of negative life outcomes. Research shows that lacking emotional self-regulation in childhood can predict a wide range of consequential life outcomes, including income, financial security, occupational prestige, physical and mental health, criminality and gambling problems, even when family background and other factors are controlled for.[1]

Goal: To augment key initiatives of Calgary Neighbourhoods (CN) that support vulnerable populations by providing free, structured, high quality, after-school programs that promote healthy physical, social, and emotional development of vulnerable children in Grades 4 to 12

Strategy: The Calgary AfterSchool (CAS) programs provided by Social Program Services support other CN initiatives including Multi-Agency School Support Team (MASST), Social Development and Neighbourhood Connections programs, as well as other community agencies through the Calgary AfterSchool Framework. Using intentionally designed curriculum, Noticing Me- Noticing You-Noticing Us (NNN) which is grounded in Social Emotional Learning and Trauma Informed Practice. Staff create intentional curriculum that incorporates these skills into service delivery for children and youth through their attendance at programs. In addition, using a Trauma Informed Practice (TIP) lens in the programs adds an additional layer of support for children and youth coming from a variety of backgrounds and life circumstances. All program staff must complete a variety of mandatory trainings which include NNN training as well as the online Social Emotional Learning and S.A.F.E. Principles eLearning courses. CN CAS programs are offered during a variety of out-of-school hours and run for 1.5 to 3 hours at least twice a week. They are offered in strategically selected communities in conjunction with other CN initiatives focused on vulnerable populations. CN CAS programs provide learning opportunities that use S.A.F.E. /SEL principles, meaning they are sequenced, active, focused, and explicit. As well, all programs include a healthy snack. A variety of neighbourhood-based programming is offered by CN CAS programs, focusing on building leadership, self and social awareness, relationship skills, responsible decision making and emotional regulation through engaging program activities.
CN CAS programs serve the same group of registered participants for the entire program. Participants are pre-tested near the beginning of the program and post-tested in December and May for programs following conventional school timetables. and in August or September for programs operating through the summer.

Rationale: Research shows that "sustained participation in high-quality, structured developmental programming can provide supervision and help children and youth to stay out of trouble and achieve age-appropriate developmental milestones."[1] A program must be intentional to be effective, meaning it employs "specific components intended to bring about one or more particular outcomes and uses an evidence-based skills-training approach to develop particular competencies or attributes associated with those outcomes."[2]

Calgary AfterSchool

Indicators:
#34 – Children – Grades 4-6 – Self-Esteem, Self-Confidence, Optimism
#38 – Youth- Grade 7-12- Self-Esteem, Self Confidence, Identity

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[1]Calgary Neighbourhoods. 2020.Positive child and youth development. (Calgary, AB: Family & Community Support Services, The City of Calgary). Page 9.
[2] Cooper, Merrill. 2014. "Developmental programming." Positive child and youth development. FCSS Calgary Research Brief 1. Calgary: City of Calgary, FCSS Calgary. Page 4.

CALGARY NEIGHBOURHOODS

- **Community and Social Development Program**

Revised 2021 November 16

THEORY OF CHANGE:

Need: Neighbourhoods with household poverty levels between 26 and 39 per cent are considered to be at a "tipping point" where they are at risk of decline. This degree of spatially concentrated poverty is associated with social exclusion, crime, and a range of other health, social, and economic problems.[1] Calgary's lowest-income neighbourhoods feature characteristics that contribute to social exclusion, thus undermining the health and well being of residents.[2] To determine where to allocate program resources, the Calgary Equity Index[3] (CEI) is used. The CEI is an internal tool that shows which geographic areas are experiencing more or less need related to different social determinants of health indicators[4]. The CEI identifies Community Service Areas that have more indicators below benchmark. This means residents living in these areas may be experiencing a range of interacting social and economic conditions that could adversely impact their health and well being.

Goal: To engage, support and mobilize residents to strengthen neighbourhoods, provide opportunities for economic participation, and increase the social inclusion of Calgarians experiencing vulnerabilities.

Strategy: The program uses a research-based community development model to guide the work of community social workers. Community development is defined as a deliberate, democratic, developmental activity (i.e., a planned intervention) undertaken by an existing social or geographic grouping of people to improve their collective economic, social, cultural, or environmental situation.[5] Community social workers (CSW) are assigned to approximately 23 geographic neighbourhoods (as identified by the CEI). The program also supports the animation of community hubs located in the targeted neighbourhoods.[6] Each CSW is responsible for conducting a community social assessment to identify social issues. The CSWs focus on connecting and building relationships with residents experiencing vulnerability when assessing the lived experiences of those in the neighbourhood. The CSWs then mobilize community members to create, lead, and implement projects designed to address the identified social issues. CSWs support residents to gain the skills needed to enable their continued participation and increased leadership in each neighbourhood project. The program also offers a grassroots grant program that allows residents to apply for funds to implement local projects.

Rationale: Research shows that communities can be effective agents for change by influencing policies and practices that affect their quality of life. When people are given the opportunity to work out their own problems, they can find solutions that have a more lasting effect than when they are not involved in problem solving. Effective community development initiatives are well-planned and deliberate, include specific process components, and are led by community members. Community leaders generally require support and guidance from skilled community development workers to complete the process and achieve their goals.[7]

Indicators:
Community Development Contributions:
Number of community volunteers and hours
Number of community development initiatives addressing identified social issues in the community

[1] Sawatsky, J., and S.M. Stroick. 2005. Thresholds for Locating Affordable Housing: Applying the Literature to the Local Context. Calgary: City of Calgary, Community Strategies, Policy and Planning Division, Social Research Unit. Pages 18-19.
[2] Calgary Neighbourhoods. 2020. Community Development. Calgary, AB: Family & Community Support Services, The City of Calgary: Page 2.
[3] City of Calgary. 2021. "Calgary Equity Index (CEI) Dashboard." Calgary Equity Index. Calgary: City of Calgary, Community Neighbourhoods, Research & Reporting. Internal Website.
[4] See Raphael, Dennis. 2004. Social Determinants of Health: A Canadian Perspective. Canadian Scholars' Press Inc. (1).
[5] Christenson, James, and Jerry Robinson. 1989. Community Development in Perspective. Ames, IA: Iowa State University Press. See also Born, Paul. 2014. Deepening Community: Finding Joy Together in Chaotic Times. Pages 48-55. Berrett-Koehler Publishers, Inc. California.
[6] City of Calgary. 2021. "Community Hub Work." Community Social Workers. Calgary: City of Calgary, Community Neighbourhoods, Neighbourhood Support. https://calgary.ca/csps/cns/strong-neighbourhoods/strong-neighbourhoods.html Accessed 16-Nov. 2021.
[7] Craig, Gary. 2007. "Preface: Defining Community and Its Development." Journal of Community Practice 15(1-2), xxiii-xxvii.

CALGARY NEIGHBOURHOODS

- **Strategy Development and Implementation**

THEORY OF CHANGE:

Need: Policies, strategies and actions are needed for systems level change to improve social wellbeing outcomes and foster social inclusion of Calgarians experiencing vulnerabilities. Data, research, and evaluation are critical for an evidence-based approach to policy development and strategic social investments made by The City of Calgary and various public, private, and voluntary sector organizations.

Goal: To improve the social wellbeing of Calgarians through the advancement of policies and strategies at the systems level by working with and convening stakeholders, while using an evidence-based approach through research and data.

Strategy: Supported with data, research and evaluation, Strategy Development and Implementation enables The City of Calgary, businesses, social service organizations and the community to make informed decisions that measurably improve the social wellbeing of Calgarians. This is achieved through the identification of social issues, analysis of causes, problem-solving, formulation of plans, development of strategies, review of trends and outcomes, and mobilization of resources needed to take action.[1] By working with stakeholders, leveraging other initiatives at The City of Calgary and joint partnerships, coordinating and convening, strategies are developed to embed positive change and/or create greater capacity to address root causes of social issues and inequities. Research activities include data and information extraction, indicator development and monitoring, population forecasting and program evaluation. Resources and research findings may be posted to The City website, promoted through various media, and distributed in hard copy.

Rationale: The City is uniquely positioned and relied on for data, information, research, and policy and strategy development and implementation to bring a macro perspective, serving all Calgarians while recognizing diverse needs and experiences. Pathways for participation are created to gather the input from residents, including those experiencing vulnerabilities. The literature indicates that "upstream policy and systems change is a critical component to achieving positive health (and social) outcomes", especially when resources and capacity for prevention-based work is limited.[2] Effective systems level change through development and execution of community strategies and plans strengthen our social fabric, improving the quality of life for all Calgarians.[3]

Indicators:
Policy or Systems Change

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[1] Turner, John B. (ed.). 1977. Encyclopedia of Social Work. Washington: National Association Social Workers. Page 1412. Also see Calgary Neighourhoods. 2020. "Steps to change policy." Policy and systems change. FCSS Calgary Research Brief 6. Calgary: City of Calgary, FCSS Calgary. And Pennie G. Foster-Fishman, Branda Nowell and Huilan Yang. 2007 "Putting the system back into systems change: a framework for understanding and changing organizational and community systems". American Journal of Community Psychology 39:197-215.

[2] Uncommon Solutions. 2018. Guidebook to Successful Policy and Systems Change. Olympia, WA. Page 3.

[3] Dreier, Lisa, David Nabarro and Jane Nelson. 2019 Systems Leadership for Sustainable Development: Strategies for Achieving Systemic Change. Harvard Kennedy School. Cambridge, MA. Page 8.

CALGARY SENIORS' RESOURCE SOCIETY
- **SeniorConnect Gatekeeper Program**

THEORY OF CHANGE:

Need: It is estimated that over 10 per cent of Calgary's population is over the age of 65 and that this is the fastest growing age group in Calgary.[1] The most common risk factors for social isolation among seniors are living alone, having low income, being single, experiencing loss, experiencing language and cultural barriers, and having transportation difficulties.[2] Reducing social isolation continues to be a prime focus of service interventions with older adults because of "the adverse impact it can have on health and well-being."[3]

Goal: To activate the community to identify seniors who are at risk in order to address and prevent issues related to their social isolation.

Strategy: SeniorConnect is a city-wide gatekeeper program that provides social emergency response to seniors at potential risk. Gatekeepers are community members who can identify signs of potential isolation or danger. They include neighbours, friends and family, and front line workers such as bank tellers, grocery store clerks, pharmacists, postal workers, utility personnel, and emergency services staff. Anyone in the city can call SeniorConnect to identify seniors who are at risk. The program has three key components: (1) public education to raise awareness about the program; (2) a 24-hour help and referral line operated in partnership with the Distress Centre; and (3) response services carried out by registered social workers and specialized volunteers. Workers respond promptly to referrals by making home visits, where a detailed risk assessment is carried out. Crises are addressed and the potential for further social isolation and medical emergency response is then addressed. Once workers are satisfied that risks factors have been reduced, connections are made to longer-term supports to ensure continued service delivery and increased social inclusion for these vulnerable seniors. Participants who receive longer-term support are pre-tested when those services are requested and post-tested at file closure.

Rationale: Gatekeeper programs are noted for playing an important role in identifying socially isolated seniors through collaborations and social partnerships.[4] Research shows that social isolation can be prevented with good health, communication skills, social skills, accessible services, feeling connected to and valued by others, having meaningful roles in society, and having access to transportation.[5]

Indicators:
#4 – Positive Social Ties and/or Bonding Social Capital
#15 – Long-Term Decreased Expenses; Increased Income from Sources other than Employment
#16 – Poverty Reduction – Emergency/Short-Term Help

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[1] City of Calgary. 2015. Seniors Age-Friendly Strategy and Implementation Plan 2015-2018. Calgary: City of Calgary, Community & Neighbourhood Services. Page 5.
[2] Cooper, Merrill. 2014. "Vulnerable Seniors." Positive social ties and vulnerable populations. FCSS Calgary Research Brief No. 4. Calgary: City of Calgary, FCSS Calgary. Page 8.
[3] Findlay, Robyn A. 2003. "Interventions to reduce social isolation amongst older people: where is the evidence?" Ageing & Society 23: 647-658.
[4] National Seniors Council. 2014. "Supports, Community Capacity and Inclusion." Report on the Social Isolation of Seniors 2013-2014. Gatineau, QC: National Seniors Council. Page 13.
[5] National Seniors Council. 2014. "Supports, Community Capacity and Inclusion." Scoping Review of the Literature: Social Isolation of Seniors, 2013-2014. Gatineau, QC: National Seniors Council. Pages 8-9.

CALGARY SENIORS' RESOURCE SOCIETY

- **Social Inclusion Supports for Vulnerable Seniors**

Revised 2015 December 07

THEORY OF CHANGE:

Need: Seniors are more likely than the general population to lack positive social ties and, for this reason, to be at risk of social exclusion.[1] For vulnerable seniors, social isolation is associated with poor general health.[2] An elderly widower may need connections with people who will pick up his groceries or social connections to prevent the myriad health problems associated with isolation among older people.[3] Social isolation can have physically and emotionally damaging effects resulting in depression, poor nutrition, decreased immunity, anxiety, fatigue, and social stigma. Independently or collectively, these conditions are likely to impact on survival.[4]

Goal: To facilitate meaningful relationships between volunteers (many of whom are seniors) and vulnerable seniors, resulting in mutually beneficial changes to quality of life and social inclusion.

Strategy: Volunteers promote social inclusion among vulnerable seniors. Relationships are long term, although when, where, and how frequently interactions occur are determined by each senior and volunteer, not by program staff. Support falls into eight categories. (1) Seniors are matched with a volunteer for regular assisted shopping excursions. (2) Volunteer drivers escort seniors to and from medical appointments. (3) A volunteer is matched with a senior for weekly visits, where the pair determines the activities they do. (4) Seniors are matched with a volunteer who regularly telephones them at an agreed upon time to provide social support and reassurance. (5) Senior caregivers are matched with a volunteer who provides weekly social respite by staying with their care recipient, typically another senior who also benefits from this interaction. (6) Volunteers who are experienced caregivers are matched with new caregivers in need of social support. (7) Seniors who are unable to appropriately care for their pets are matched with a volunteer who will provide assistance with pet care and, if necessary, the placement of a pet with a new owner. (8) The Igniting Neighbours initiative activates local pockets of people to support isolated seniors that are in close geographic proximity by facilitating social connections and building natural support networks.

Rationale: The extensive body of literature on seniors' social isolation focuses on preventing social isolation to avoid the serious physical health, mental health, and quality of life problems socially isolated seniors often experience.[5] Elder-helping programs tend to be advantageous from a social contact perspective for both the volunteer and the elder.[6]

Indicators:
4 – Positive Social Ties and/or Bonding Social Capital

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[1] Cooper, Merrill. 2014. "The Issue." Positive social ties and vulnerable populations. FCSS Calgary Research Brief 4. Calgary: City of Calgary, FCSS Calgary. Page 1.

[2] Cooper, Merrill. 2014. "What needs to be prevented: Social isolation." Positive social ties and vulnerable populations. FCSS Calgary Research Brief 4. Calgary: City of Calgary, FCSS Calgary. Page 2.

[3] Cooper, Merrill. 2014. "What works to increase positive social ties for vulnerable members of at-risk groups." Positive social ties and vulnerable populations. FCSS Calgary Research Brief 4. Calgary: City of Calgary, FCSS Calgary. Page 2.

[4] Keefe, Janice, Melissa Andrew, Pamela Fancey, and Madelyn Hall. 2006. "Executive Summary: Research Findings." Final Report: A Profile of Social Isolation in Canada. Halifax: Mount Saint Vincent University, Nova Scotia Centre on Aging and Department of Family Studies and Gerontology. Page iii.

[5] Cooper, Merrill. 2014. "Vulnerable seniors." Positive social ties and vulnerable populations. FCSS Calgary Research Brief 4. Calgary: City of Calgary, FCSS Calgary. Page 8.

[6] National Seniors Council. 2014. "Supports, Community Capacity and Inclusion." Scoping Review of the Literature: Social Isolation of Seniors, 2013-2014. Gatineau, QC: National Seniors Council. Page 8.

CALGARY SENIORS' RESOURCE SOCIETY

- **The Way In Program – Older Adult Outreach**

THEORY OF CHANGE:

Need: Vulnerable older adults in Calgary are faced with diverse resources to assist with physical and mental health, housing, home maintenance, finances, transportation, legal rights, and safety. Programs also provide opportunities for learning, contributing to their community, and social interaction. Aging, low income, low education, and language or cultural barriers are associated with social isolation.[1] Access to services and resources help to improve social inclusion, economic self-sufficiency, and community participation.[2]

Goal: To increase social connections and access to supports and resources for vulnerable older adults.

Strategy: The Way In Program consists of a network of four service providers: Calgary Chinese Elderly Citizens' Association, Calgary Seniors' Resource Society, carya, and Jewish Family Services. Each offers community-based outreach support to older adults across Calgary, including services for specific ethno-cultural groups. Services include assessment; information, referral and connection to resources; assistance with applications for benefits; supportive counselling; case management; advocacy; group activities and workshops; caregiver/ family support; connection to social and cultural programs; and elder abuse intervention in coordination with other community services. Program staff provide centralized access and standardized services, evaluation, coordination, and cultural competency to seniors across the city. Program involvement ranges from six to ten months.

Rationale: When vulnerable older adults "know people to turn to for resources, support, and connections, it helps them to get by or get ahead."[3] The lack of clarity about social isolation in older adults makes defining effective interventions difficult.[4] Research testing a clear definition of the concept and The Way In Network's program focus indicates interventions improved four of six dimensions of social isolation: access to resources; number of acquaintances; feeling supported; and belonging to community.[5] An evaluation of the Way In Program showed 97 per cent of its case management clients obtained the services they were seeking through the referral process provided by the program.[6]

Indicators:
#15 – Long-Term Decreased Expenses; Increased Income from Sources other than Employment
#16 – Poverty Reduction – Emergency / Short-Term Help

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[1] Nicholson, Nicholas R. 2012. "A Review of Social Isolation: An Important but Under-assessed Condition in Older Adults." The Journal of Primary Prevention 33(2):137-152.

[2] Cooper, Merrill. 2014. "Vulnerable seniors." Positive social ties and vulnerable populations. FCSS Calgary Research Brief 4. Calgary: City of Calgary, FCSS Calgary. Page 8.

[3] Cooper, Merrill. 2014. "The issue." Positive social ties and vulnerable populations. FCSS Calgary Research Brief 4. Calgary: City of Calgary, FCSS Calgary. Page 1.

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[5] DesCamp, E., J. Hewson et al. 2014. "Reducing Social Isolation in Older Adults Living in Community." Presentation. American Society on Aging Conference. March 14, 2014. San Diego, CA. Page 4.

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CALGARY WOMEN'S EMERGENCY SHELTER ASSOCIATION
- **Community Services Counselling Program**

THEORY OF CHANGE:

Need: In 2019 Alberta had the third highest total number of female victims, and had the sixth highest rate of female victims for police-reported family, and non-family violence and abuse[1,2]. In Calgary, Calgary Police Service reports that calls made to police for assistance or for police presence in escalated domestic disputes that have not reached a criminal threshold remain elevated over expected levels; the first quarter of 2021 shows an increase of 11% from the five-year average for the same period, and a marginal increase over first quarter 2020[3]. As the majority of the victims of both family, and intimate partner violence and abuse are women, women experiencing family violence and abuse often need immediate and accessible support and assistance to leave the abusive situation and keep safe and may need support to address the family violence and abuse they are experiencing[4,5].

Goal: To help individuals increase their safety and establish a life free from family violence and abuse.

Strategy: The Community Services Counselling Program provides a client centered approach for clients experiencing family abuse and violence through counselling, safety planning, case planning, parenting support, navigating resources, and referrals for basic needs. During the initial period, clients receive an average of twelve hours of counselling over three to eight weeks. As they move into longer term counselling, they usually receive two to four hours of counselling per month, for a total of about thirty hours of counselling over six to twelve months. The Counsellors connect with individuals in the community on an as-needed basis, which may range from daily contact to weekly or monthly contact over the long-term, depending on the crisis situation and need for counselling. Reflective pre-tests are completed at intake and post tests are completed every three months and at discharge.

Rationale: Research shows that early intervention to support victims of family violence and abuse can reduce its consequences and may also reduce the chances of further exposure to interpersonal violence and abuse in the longer term. Successful interventions for individuals who have experienced family violence and abuse include counselling, emotional support, parenting support, social support, and support for problem-solving and decision-making[4,5,6,7]. While brief individual support (less than twelve hours) increases the use of safety behaviors, more intensive individual engagement lasting ten weeks or more can reduce violence and abuse in the longer term from twelve to twenty-four months[8,9,10].

Indicators: #11 – Safety from Domestic Violence

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[8] Buckle, Leslie, Brenda Simpson; Samantha Berger; and Robin Metcalfe. 2014. Prevention and Early Intervention for Domestic Violence. Calgary: Brenda J. Simpson & Associates. Page 66.

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CALGARY YOUNG MEN'S CHRISTIAN ASSOCIATION

- **CAS, Bunch Stars**

Need: The residual impact of Residential schools, colonizing policies, intergenerational trauma and loss of culture on the physical traditions and practices of Indigenous communities across Canada cannot be understated. Practices that ensued the health and wellness of Indigenous communities such as the Sundance were banned outright, and the social infrastructures that guided the cultural teachings, values, norms and behaviours around physical health were subsequently destroyed. Indigenous communities across Canada are re-visiting their cultural practices such as youth development through society structures as a pathway back to health in ways that are fun, build confidence and create community at the same time.

Goal: Students will learn about legacy education and positive cultural identity, to support a healing journey undoing the effects of intergenerational trauma and supporting their transition into positively contributing adults.

Strategy: Prior to contact young people were invited into societies after proving themselves by recognized passages and rituals. Societies were the education systems, administration, military and police and held communities together and accountable to each other. Children went into a society at a young age, where they stayed a few years before moving to another hence the one to threeyear time frame. For example, the Chickadee Lodge teaches age-related values, roles, and responsibilities to 9 to 12 years old; transitioning onto the Prairie Chicken Lodge (13-17), learning and becoming mentors to the younger Chickadees or "neepomakeeks,"; finally graduating to the Brave Dog Lodge (18-24), learning discipline of mind, body, and spirit while being instilled with a strong sense of place and identity. The goal of Ihkanakaatsiks is to support the person to grow to adulthood by developing the gifts with which he/she has been given, as a total human being. Specific strategies may include: field trips to historic sites, cultural activities (smudging, sweats, and face painting) and teachings by Elder(s) who bring historical and cultural knowledge. Elders will support participants outside of the program, if necessary. Each Lodge within the Ihkanakaatsiks Bunch Stars program will meet twice a week over the course of the school year (Sept to June); inclusively, approximately 50 to 75 students will attend the three (3) Lodges, from one to three years.

Rationale: Preventative socio-recreation can assist people with longstanding trauma in culturally safe, and fun programming that in some cases, eases people into the often-times difficult journey of personal reconciliation and reconnection with their own cultural identity and family health. Overall, three themes emerged that drive a more integrated approach. They are: holistic programming; bringing culture to the core; and linking historical understanding to wellness. Findlay and Kohen[1] support the use of holistic approaches highlighting the secondary benefits to participant's physical and mental health in areas of obesity, self-esteem, loneliness, anxiety, suicide, pride and identity. An important part of leaving the past behind and anticipating the future is having an ethical, open and developmental environment that creates self-directed learning environments for Indigenous children and youth to reclaim a sense of efficacy that was taken by residential schools.

Indicators:
#50 – Sense of Cultural belonging and feeling supported
#51 – Personal advocacy and a sense of empowerment

Calgary
AfterSchool

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CALGARY YOUNG WOMEN'S CHRISTIAN ASSOCIATION
- **Adult Counseling Program**

THEORY OF CHANGE:

Need: Domestic violence has increased in Alberta; with the recent escalation attributed, in part, to the economic downturn.[1] As cited in the Calgary Herald, the Calgary Police reported between January and September 2017 domestic violence incidents were 34 per cent higher than the five-year average and up six per cent in one year.[2]

Goal: To reduce instances of domestic violence by embedding skillful behaviour into family systems.

Strategy: Group-based intervention has been a mainstay of domestic violence treatment for decades. The content of the groups is informed by the Provincial Family Violence Treatment Program Standards. Groups are gender-segregated and facilitated by two leaders who use a gender-inclusive perspective to address the experiences of those who identify as victims and perpetrators. Groups use the following strategies: Dialectical Behaviour Therapy; Cognitive Behaviour Therapy; psycho-education; feminist intervention; and supportive counselling. The program consists of 16 weekly sessions, two hours each, 12 or 13 times per week, daytime and evenings Monday-Thursday. Content is delivered through talk-based methods, in-group of activities, and skills practice between sessions.

Individual counselling is used with a variety of disorders and social problems. Staff engage in short-term intervention to address psychosocial challenges associated with abuse and/or domestic violence. Counselors use a variety of treatment models (embedded in a trauma-informed context) to support clients in learning strategies to cope safely, including: Dialectical Behaviour Therapy; Cognitive Behaviour Therapy; Mindfulness-based Stress Reduction; and Feminist intervention. Clients are referred to individual counselling to supplement and support their involvement in group intervention; to prepare for group intervention; or when their' unique needs indicate individualized care. The program consists of one hour sessions, up to 16 sessions over a four to six month period

Rationale: To date, little empirical research has been conducted to examine the efficacy of the dominant approach to group-based domestic violence intervention.[3] Research into best practices reveals a need for therapeutic services that are trauma-informed and strengths-based and enable individuals to choose healthy alternatives to abuse, heal from the impacts of abuse, and move toward a life free of abuse.[4] The chosen interventions are often used in the treatment of: anxiety and mood disorders; dysregulation; impulsive behaviours (e.g. substance misuse, self-harm etc.); and relationship conflict. Although treatment outcomes in domestic violence are varied, optimism is justified when evidence-based approaches are applied in a consistent manner via a trauma-informed lens. Individual counseling allows for clients to receive treatment when family and group intervention are contra-indicated. In addition, individual counseling meets the needs of those with unique needs or those requiring additional support while participating in group.

Indicators:
19 – Family Cohesion – Parent / Adult Questions

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[1] Canadian Women's Foundation. 2016. "Fact Sheet: Moving Women Out of Violence". https://www.canadianwomen.org/wp-content/uploads/2017/09/FactSheet-VAWandDV_Feb_2018-Update.pdf

[2] Cole, Yolande 2017, 'Domestic violence incidents increased in 2017: Calgary police statistics', Calgary Herald, December 30, accessed 27 July 2018, <https://calgaryherald.com/news/local-news/domestic-violence-incidents-increased-in-2017-calgary-police-statistics>

[3] Corvo, K., Dutton, D., & Chen, W. 2009. "Do Duluth Model Interventions with Perpetrators of Domestic Violence Violate Mental Health Professional Ethics?" Ethics & Behaviour, 19 (4). Pages 323-340.

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CALGARY YOUNG WOMEN'S CHRISTIAN ASSOCIATION

- **Child Development – Children's Group**

THEORY OF CHANGE:

Need: Infant and early childhood exposure to toxic stress has a negative impact on the developing brain. Specifically, the healthy development of the executive functioning component of the brain is compromised, leaving children vulnerable to poor mental function and impulsive behavior in the later years. Toxic stress includes but is not limited to: domestic violence; chaotic home and neighborhood environments; and unresolved parental issues with mental health and substance misuse[1]. Children who grow up with domestic violence are more likely to either be abused or perpetrate abuse towards others as they become adults[2].

Goal: To increase social inclusion by improving family functioning through the introduction of skillful behavior to children and adolescents.

Strategy: The program offers developmentally appropriate group intervention for children ages eight to twelve to reduce stress, manage strong emotions, promote effective (skillful) behavior, and build positive relationships. Delivery methods balance talk-based methods with activities. The group runs six times a year. Each offering runs for eight sessions, for two hours per session, accommodating a maximum of eight children per group. Each session incorporates trauma-informed cognitive behavioral therapy and mindfulness skills to addresses emotional and developmental needs. A mindfulness and skills training program for parents of the children runs concurrently to increase the likelihood that the family will integrate the learnings. Parents and children can also access individual and/or family counseling.

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Rationale: From the FCSS research brief on positive child and youth development it is clear that positive developmental outcomes are based in early development[3]. A particularly telling statistic from the brief indicates the importance of emotional regulation in the healthy development of children. "In Canada in 2010, 35 per cent of girls and 27 per cent of boys in grade 6 and 44 per cent of girls and 28 per cent of boys In grade 10 reported high levels of emotional problems, such as depression, sadness, anxiety and sleeping problems. "Emotion regulation clearly plays a role in the successful functioning of young people in their families, schools and communities. Also from the research brief: "For vulnerable children and youth, participation in developmental programming can afford protective or "buffering" factors that can offset multiple risk factors". Evidence suggests that children who are exposed to domestic violence show less ability to regulate negative emotions, have more difficulty soothing themselves, and need more external support. This suggests that mindfulness has a positive influence on resilience, self-regulation, and well-being. In recent years Cognitive Behavioral Therapy (CBT) and Mindfulness have been used concurrently to address a variety of psychosocial concerns. In fact, the World Health Organization (WHO) identifies CBT as appropriate for adolescents experiencing various forms of trauma[4].

Indicators:
#34- Children- Grades 4-6 – Self-Esteem, Self-Confidence, Optimism

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[1] Alberta Family Wellness. www.albertafamilywellness.org
[2] Alberta Council of Women's Shelters. 2014. "ACWS Fact Sheet: Children". A fact sheet on domestic violence and children andrecommended actions to make change. https://acws.ca/collaborate-document/2387/view
[3] Calgary Neighbourhoods. 2020.Positive child and youth development. (Calgary, AB:Family & Community Support Services,The City of Calgary).
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CALGARY YOUNG WOMEN'S CHRISTIAN ASSOCIATION
- **Child Development – Parenting Program**

THEORY OF CHANGE:

Need: Children and youth who witness violence between their parents are at higher risk for victimization than young people from nonviolent households.[1] Domestic violence, chaotic environments, and unresolved parental issues with mental health have a negative impact on the developing brain.[2] Domestic violence has increased in Alberta caused, in part, by the economic downturn.[3]

Goal: To increase social inclusion by enhancing parenting skills through the introduction of skillful behavior to the family system.

Strategy: Parents come together to learn skills that support family functioning and their parenting, through various modes including multi-week groups, single instance workshops (to build interest in the multi-week sessions) and individual coaching sessions. The programs are typically delivered in various locations throughout the community but may be constrained by pandemic restrictions and social distancing requirements. In the event of ongoing restrictions, we intend to maintain virtual delivery as an option with hybrid and in-person options offered as provincial health restrictions allow.

The programs are designed to be trauma-informed and focus on healthy brain development, child development, positive interactions and effective behavior management. The delivery methods are evidence-based and draw from well-established parenting interventions such as The Incredible Years. Groups run six times a year, with a maximum of 10 parents per group, are eight weeks long for two hours per week. Group programming is supplemented with single session (1-3 hours) parenting workshops offered no less than six times a year and individual parenting coaching, as needed.

Rationale: "A stable and secure family life is vital to healthy child and youth development". [4] Parents play an important role in promoting healthy brain development. Encouraging parents to apply these principles in the home supports the proper development of problem-solving segment of the brain in children thus reducing the likelihood of impulsive behaviour and mental health concerns (e.g. violence, substance misuse etc.). Teaching positive parenting skills and supporting parents to have better mental health and coping mechanisms results in healthier and stronger families and communities.

Indicators:
#20- Parenting- Parent Questions

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[1] Stover, C. 2005. "Domestic Violence Research: What Have We Learned
[2] Alberta Family Wellness. www.albertafamilywellness.org
[3] Canadian Women's Foundation. 2016. "Fact Sheet: Moving Women Out of Violence". https://www.canadianwomen.org/wp-content/uploads/2017/09/FactSheet-VAWandDV_Feb_2018-Update.pdf
[4] FCSS. 2014. "FCSS Positive Parenting and Family Functioning". FCSS Calgary Research Brief 2. Calgary: City of Calgary, FCSS Calgary. Pages 1-2.

CALGARY YOUNG WOMEN'S CHRISTIAN ASSOCIATION
- **Community Outreach**

THEORY OF CHANGE:

Need: Alberta has the third highest rate of self-reported spousal violence Canada.[1] An estimated 70 per cent of spousal violence in Alberta is not reported to police.[2] Domestic violence has increased in part because of Alberta's economic downturn.[3] Women who experience domestic violence are at an increased risk for sexually transmitted infections, disability preventing work, anxiety disorders, depress and post-traumatic stress disorder.[4] Children and youth who witness violence between their parents are at higher risk for victimization than young people from nonviolent households.[5] Many women lose economic independence and become functionally homeless when they go to shelters.[6]

Goal: To increase personal capacity through community-based interventions focused on instrumental support, connection, safety, and choice.

Strategy: Program outreach staff provide timely, intentional support services in the community tailored to the unique needs of participants. They use client-driven, collaborative processes to provide quality health and support services through effective and efficient resource use.[7] While outreach staff work with clients to assess danger; set goals and develop safety plans the most frequent type of support requested by participants is to reduce their financial vulnerability through the acquisition of an income stream and management of expenses. Very often the participants of this program are financially challenged and lack any form of sustainable income significantly reducing their ability to acquire housing or meet the necessities of life away from the abusive situation. Program participation is voluntary, needs based and with an average duration of less than of six months.

Rationale: Given the complex dynamics of relationships where violence is present, including financial and family vulnerability, some women choose to get support in the community rather than enter a shelter.[8] Providing instrumental financial support and education to women as early as possible can reduce the need for emergency services, disrupt the pattern of violence, and minimize associated psychosocial damage. Outreach programs provide an important alternative to shelter and support women who are often invisible due to isolation and weakened social supports. Outreach programs provide less disruptive interventions and support women's empowerment without requiring participation in the formal domestic violence shelter system.

Indicators
#15 – Long Term Decreased Expenses -Increased Income
#16 – Poverty Reduction – Emergency Short-Term Help (Staff Rated)

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[1] Statistics Canada. 2016. "Chart 2: Individuals reporting spousal violence, by province". Statistics Canada. Website. https://www150.statcan.gc.ca/n1/daily-quotidien/160121/cg-b002-eng.htm

[2] Canadian Women's Foundation. 2016. "Fact Sheet: Moving Women Out of Violence". Canadian Women's Foundation. Website. https://www.canadianwomen.org/wp-content/uploads/2017/09/FactSheet-VAWandDV_Feb_2018-Update.pdf

[3] Canadian Women's Foundation. 2016. "Fact Sheet: Moving Women Out of Violence". Canadian Women's Foundation. Website. https://www.canadianwomen.org/wp-content/uploads/2017/09/FactSheet-VAWandDV_Feb_2018-Update.pdf

[4] Feder & Howarth. 2014. "The Epidemiology of Gender-Based Violence." In Bewley, Susan and Welch, Jan (eds). ABC of Domestic and Sexual Abuse. Wiley Blackwell BMJ Books. Page 3.

[5] Stover, C. 2005. "Domestic Violence Research: What Have We Learned." Journal of Interpersonal Violence. 20. 448-454.

[6] Arroyo, K., Lundahl, B., Vanderloo, M., & Wood, D.S. (2015). Short-term interventions for survivors of intimate partner violence: A systematic review and meta-analysis. *Trauma, Violence, & Abuse, 1-17.* doi: 10.1177/1524838015602736.

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[8] Brewster. 2002. "Domestic Violence Theories, Research and Practice Implications." In Roberts, Alberta (ed). Handbook of domestic violence intervention strategies: policies, programs and legal remedies. Oxford University Press, Oxford; New York.

CALGARY YOUTH JUSTICE SOCIETY

- **In the Lead**

THEORY OF CHANGE:

Need: The transition to adulthood is more difficult for youth who, for many reasons, are identified as vulnerable. These youth benefit from developmental programs, especially when they are ready to take steps in a positive direction.[1] Vulnerable youth have strengths they can use to help them overcome their challenges and make positive choices for their future. Due to their circumstances, these strengths are often overlooked because they are undiscovered or they are being used in potentially harmful ways. Without programming that focuses on strengths, youth are at risk of engaging in behaviors such as substance abuse and participation in illegal activities, which jeopardize their chances of achieving future success.[2] Quality programming builds social capacity, wellness, and helps vulnerable youth successfully transition to adulthood.[3]

Goal: To help vulnerable youth develop an increased sense of personal value, belonging, and connectedness to their community.

Strategy: In the Lead is a 4 month long leadership and character development program that focuses on participants' innate strengths as opposed to their deficits. The program uses in-class weekly instruction, monthly group volunteering in the local community, and one-on-one coaching with an adult volunteer coach throughout the program. In the Lead also explores the practical aspect of leadership through group volunteering events that engage students with their community in a meaningful way, enable them to understand and embrace their ability to help others, provide the opportunity to practice the leadership skills they learn in class, and allow them to see themselves through the lens of helping others, as opposed to as someone needing help. The program is offered twice a year in high school and community settings.

Rationale: The strength-based approach used by In the Lead is standardized and validated by international empirical research.[4] The curriculum is based on seven core leadership competencies identified by Resiliency Initiatives.[5] It incorporates key principles known to be effective when providing a service to vulnerable youth, including relationships; collaboration; strengths-based; participation and inclusion; individually responsive and flexible; capacity building through resilience; and continuity of care.[6]

Indicators:
38 – Youth – Grades 7-12 – Self-Esteem, Self-Confidence, Identity

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[1] Cooper, Merrill. 2014. "Transition to adulthood for vulnerable youth." Positive child and youth development. FCSS Calgary Research Brief 1. Calgary: City of Calgary, FCSS Calgary. Page 13.
[2] Kelly, A. 2012. "Adolescent alcohol-related harm reduction." In Marlatt, G.A., M.E. Larimer, and K. Witkiewitz (eds.). Harm Reduction: Pragmatic Strategies for Managing High Risk Behaviors. 2nd ed. New York: The Guildford Press. Page 318.
[3] Resiliency Initiatives. 2012. Core Character Competencies and Positive Youth Development. Calgary: Resiliency Initiatives. Page 1.
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[5] Resiliency Initiatives. 2012. Core Character Competencies and Positive Youth Development. Calgary: Resiliency Initiatives. Page 2.
[6] Cooper, Merrill. 2014. "Key principles for effective service delivery to vulnerable youth." Positive child and youth development. FCSS Calgary Research Brief 1. Calgary: City of Calgary, FCSS Calgary. Page 14.

CANADIAN MENTAL HEALTH ASSOCIATION – CALGARY REGION
- **Family Support Program**

THEORY OF CHANGE:

Need: The health and wellness implications for family and caregivers supporting others struggling with a mental health and/or substance use parallel those of other high needs client-caregivers. Research consistently demonstrates that caregivers supporting others with mental health and/or substance use concerns are at risk for higher rates of social isolation[1] and increased propensity for development of psychological concerns which diminish quality of life and satisfaction.[2]

Goal: To help family members/caregivers who are supporting someone with a mental health issue/mental illness and/or addiction understand and learn to manage their circumstances more effectively, reduce their own feelings of distress and isolation, and enhance the performance of the family as a system as well as the individuals within it.

Strategy: Through a continuum of family peer and staff led drop-in groups, workshops, individual counselling, structured psycho-educational therapy, caregivers and families will learn timely strategies related to supporting their loved ones. Drop-in groups and workshops support individuals with a lower acuity of need (early intervention) and counselling and psycho-educational therapy support individuals with higher acuity of need. This continuum creates increased access and flow of services, by creating transition supports to and from community. Information and skills include knowledge of specific mental illnesses, symptoms, behaviours, and support required, as well as healthy boundary-setting and self-care skills. Content can be tailored to meet changing population needs (i.e., COVID-19 impact, etc.) and will support in-person and virtual delivery opportunities to maximize diverse community access needs. Family peers will be engaged to increase access to services, enhance program curriculum by co-developing content for drop-in groups and workshops, and provide a lived experience perspective that participants can connect with and trust in. Groups are four to eight sessions in length (with sessions between two to three hours long) and are delivered three times per year for both workshops and psycho-educational therapy. In addition, year-round, drop-in groups run weekly (in each quadrant of the City when possible). Translation supports are used where available to reduce barriers and create increased inclusivity for ethno-diverse communities. Caregivers and families receive ongoing and adapted support and skill development as their needs change over time.

Rationale: With timely and appropriate support, family members can improve their own coping strategies and their ability to support someone with mental illness and can positively affect their probability of relapse. Mental health counselling can significantly improve quality of life and stress impact among family caregivers[3] while supporting recovery, resilience and adaptability[4]. Literature also demonstrates that peer support can supplement formal supports with programming focusing on supporting socially isolated families to build networks of formal and informal support making positive impact[5]. Program activities are meant to compliment formal service system use—this design follows advocacy for multi-modal approaches to mental health / substance abuse support.[6]

Indicators:
19 – Family Cohesion - Parent /Adult Questions

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[1] Pinto, J. 2016. "Barriers to social participation in caregivers of older people: A systematic review". Research in health science, 1(2): 78-84.

[2, 3]Karimi, Z., Rezaee, N., Shakiba, M. & Navidian, A. "The effect of group counseling based on quality of life therapy on stress and life satisfaction in family caregivers of individuals with substance use problems: A randomized controlled trial". Issues in Mental Health Nursing, 40(12):1012-1018.

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CANADIAN MENTAL HEALTH ASSOCIATION – CALGARY REGION
- **Grief and Loss Support Program**

THEORY OF CHANGE:

Need: In a society where Canadians are already feeling low perceptions of social support and connectedness[1], individuals and families today are facing increasing risk for development of acute and complex grief reactions relating to current social concerns such as suicide epidemics[2], non-death loss[3] and economic crises[4]. Grief and loss can prompt social isolation and feelings of hopelessness[5], as well as poor adjustment behaviors such as repetitive negative thoughts[6]. There is a critical need for greater access to appropriate mental health supports to support a continually growing need in our city.

Goal: To give those struggling with death and non-death grief and loss experiences, an opportunity to develop knowledge, skills, and behaviors that support healthy transition through the grief and loss process and the ability to approach challenging life experiences with a renewed sense of hope and social connection.

Strategy: Through individual counselling and bereavement support groups tailored to unique circumstances associated with currently identified population needs, individuals and families will receive timely, knowledgeable, and compassionate support to work through the grief and loss process and return to a place of hope and meaningful engagement in their lives and communities. Support opportunities will be provided through blended (in-person; virtual) modalities, increasing access to services for communities in need. Groups are between 4-8 sessions (sessions are two to three hours long) and are offered three times per year to meet community demand. In addition, volunteer-facilitated weekly, two-hour drop-in groups are provided to key underserved populations such as individuals dealing with the loss of a loved one to suicide.

Rationale: Research has shown that social support can have a 'stress-buffering' effect related to grief reactions in key bereaved populations such as single adults[7]. Studies have shown social disconnectedness and perceived social isolation have been associated with both anxiety and depression for vulnerable groups[8]. Social support and the creation and maintenance of social bonds have also been shown to support positive posttraumatic growth of suicide-bereaved individuals[9]. Program activities are meant to compliment formal service system use—this design follows support for multi-modal approaches to mental health / substance abuse support in empirical literature[10]. Incorporation of technology into service delivery is based on research supporting technological service delivery for change / substance use management in various vulnerable populations[11].

Indicators:
19 – Family Cohesion – Parent / Adult Questions

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[1] Angus Reid Institute. A Portrait of social isolation and loneliness in Canada today. Angus Reid Institute. Published June 17, 2019. Accessed March 23, 2020. http://angusreid.org/social-isolation-loneliness-canada/

[2] Martinez, A. (2018). "Male suicide as a silent epidemic". Psychiatria Danubina, 30(3): 374.

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CANLEARN SOCIETY FOR PERSONS WITH LEARNING DIFFICULTIES

- **CanLearn Friends and Teen Talk**

THEORY OF CHANGE:

Need: Middle childhood and adolescence is a period of fast-paced growth with increasing opportunities for "getting into trouble" with peers an in the community. Children and youth with learning disabilities and/or associated disorders (e.g., AD/HD) experience difficulties that interfere with the development of healthy peer relationships[12].

Goal: To increase a sense of belonging, social inclusion, and successful transition into adolescence and adulthood for children and youth with learning difficulties by enhancing the development of social skills through participation in a structured program. As a result of participation in the program, children will learn skills to improve behaviour, make good decisions, and build healthy peer relationships. Skills include friendship and conversation skills, understanding and dealing with emotions, social problem-solving skills, and flexible thinking.

Strategy: The program targets teacher-identified children and youth with learning difficulties in grades four to six (ages 10-12) and grades seven to eight (ages 12-14) who struggle with social interactions. A comprehensive social and emotional learning curriculum is woven into a fun program that revolves around five competencies of emotional intelligence: self-awareness, self-management, responsible decision making, social awareness, and relationship skills. Targeted social skills are broken into teachable components and includes, discussion, role-playing, social scripts, and suggested home activities to support carry-over of skills into the home/community environment. The program takes place at the school twice per week for students in grades four to six and once per week for students in grades seven and eight. The program runs for eight-weeks starting in September to December, January to March, and April to June with 10 to 15 children participating in each group.

Rationale: Research shows that social interaction deficits prove to be a defining characteristic for approximately 75% of youth with learning difficulties[2]. Negative consequences of social skill deficits include increased chance of involvement with juvenile authorities, legal problems, or both[345]. Youth with learning difficulties are at least twice as likely to drop out of school compared to youth without these challenges[678]. Social skills intervention programs have been advocated for in the research community as effective means of treating social skill deficits in children and youth with learning disabilities.

Indicators:
#24 – Children-Grades 4-6 Positive Friendships/Social Skills
#34 – Children-Grades 4-6 Self-esteem, Self-confidence, Optimism

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CANLEARN SOCIETY FOR PERSONS WITH LEARNING DIFFICULTIES, THE
- **Families Learning Together**

THEORY OF CHANGE:

Need: Currently, nearly 29 per cent of kindergarten children in Alberta are experiencing great difficulties in one or more of the five key areas of development.[1] These children disproportionately live in low-income, socially- isolated, racialized, Indigenous, recent immigrant, and lone parents households, and have been disproportionately harmed by the Covid-19 pandemic. The Families Learning Together Program aims to help these parents support their children's healthy development and learning by enhancing their positive parenting practices, developing sensitive and responsive relationships with their children, and by making the most of day-to-day learning opportunities – listening, talking, playing, singing, and sharing books and stories together (known as Home Learning Environment).

Goal: To improve healthy child development outcomes by improving positive parenting practices, home learning environment in low-income, socially isolated families.

Strategy: The Program will use a three-part strategy including: (1) educating about positive parenting strategies and practices, (2) improving home learning environment; and (3) providing access to books. The program will implement staff- facilitated parent-child family learning groups (Magic Carpet Ride) and volunteer-driven, book distribution activities (Share the Magic).
Magic Carpet Ride parent-child groups will be offered weekly to families with children from birth to age five in 10 Calgary high needs communities over a period of 30 weeks. The work of Share the Magic volunteers will increase the access to books for families with few books to call their own.

Rationale:
For a large number of disadvantaged and marginalized parents, financial concerns, stress, worries, social isolation, loneliness and sadness are getting in the way of parenting and supporting their children's healthy development and learning. Several factors are of particular relevance: the frequency of stimulating activities, such as joint picture book reading, singing songs, or telling rhymes to a child, and the overall quality of interaction behavior in parent-child interactions.[2] Children with access to 25 books at home will, on average, complete two more years of school than children from homes without any books at all.[3] Social isolation is more common among low-income families[4], and parents without supportive networks of relatives and friends are more likely to maltreat or neglect their children[5]. The Families Learning Together Program will engage and support families to learn and build social connections together.

Indicators:
5 – Bridging Social Capital
20 – Parenting – Parent Questions

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CANLEARN SOCIETY FOR PERSONS WITH LEARNING DIFFICULTIES, THE
- **Taking Charge**

THEORY OF CHANGE:

Need: One in five Albertans face daily literacy and numeracy challenges[1]. They are not able to fill out a job application, review their child's homework, or read simple instructions on a medicine bottle. Adults with limited low education are at great risk of social exclusion and poverty. During the Covid-19 pandemic, they were more likely to experience digital exclusion because they lack Internet access and/or have low levels of digital literacy. These adults represent a heterogenous group in terms of age, gender, race, ethnicity, language, and prevalence of learning disabilities. What they have in common is disengagement from learning/school that began in early childhood and resulted in a host of life challenges in adulthood. Their day-to-day challenges of are typically compounded by the feelings of anxiety, negative self-esteem, and hopelessness which create additional barriers to learning.

Goal: To encourage adults with low education to develop their literacy and life skills and personal capacities to the point where it would be possible for them to complete high school/GED and/or pursue employment and community participation.

Strategy: The Program will use a two-part strategy including (1) small group sessions focused on helping program participants build positive learner identities and increasing their skills, motivation, commitment, and persistence for learning, (2) providing individualized, targeted one-on-one instruction sessions focused on developing reading, writing, basic digital skills, and job searching. Both components of the program will be facilitated by a trained instructor. Learners will receive 20 hours of small group instruction over the course of 10 weeks, and up to 100 hours of individual assistance in accordance with research indicating that adults with low literacy skills need a sufficient "dose" of instruction to advance their skills. [2] Special consideration will be given to adults at risk of learning disabilities – screening for potential LD, assessment, learning strategies and modified instruction will be provided as required. Throughout the program, participants will be encouraged to use their new skills and to start pursuing further education, employment or volunteer opportunities while continuing to see themselves as successful learners.

Rationale: Educational upgrading is one of the recommended strategies for preventing and reducing poverty.[3] Higher education reduces the risk of unemployment and of receiving too-few hours of employment[4]. It is associated with multiple measures of good health, along with longevity[5]. Community and civic engagement [6] both of which prevent social exclusion in the short terms also increase with higher education.

Indicators:
#9 Basic Functional Life Skills

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[1] Government of Alberta. 2016. Website. https://www.alberta.ca/international-adult-literacy-survey-results.aspx
[2] FCSS Research Brief. # 3. Individual and Family Self-Sufficiency. 2020. Page 6
[3] FCSS Research Brief. # 3. Individual and Family Self-Sufficiency. 2020. Page 5
[4] Employment and Wages for Alberta Workers with a Post-Secondary Education. :17.
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CARYA SOCIETY OF CALGARY
- **Community Financial Wellness**

THEORY OF CHANGE:

Need: Having low financial literacy places people in a disadvantaged life position, making them more susceptible to financial crisis and financial victimization, as well as unaware of the programs and benefits that may help them secure financial supports and resources.[1] One in ten Calgarians live in poverty, one in five Calgarians worry about having enough money for food, and one in three Calgarians are worried about not having enough money for housing.[2] Poverty is a life circumstance that affects people at an individual level and collective level, including physical and mental health, employment, social inclusion, life expectancy and education opportunities.[3]

Goal: By offering a spectrum of financial literacy training that is specific, tailored, and delivered through our Financial Wellness program team, participants will gain knowledge and practical skills that are relevant to their circumstances and needs. As they increase their financial literacy, they will increase their financial well-being and money management habits, as well as gain social connections and confidence.

Strategy: Using a community development and strengths-based approach, carya engages people of all ages in conversations and practices about financial wellbeing. Our range of financial wellness strategies include financial literacy, financial coaching, saving circles, tax clinics and RESP support. An "any door in" approach leverages opportunities across carya's other program areas, while also promoting meaningful connections. Specifically, our financial literacy training is flexible and relevant to the identified needs of participants, ranging from one-time workshops to a tailored curriculum group that runs over multiple weeks. Previous topics have included: banking to suit your needs, savvy spending, how to stretch your dollars and frauds and scams. Emphasis is placed on both delivering information and building a sense of belonging through participants connecting with one another. This approach also serves as a "soft entry point" that supports participants to access our other financial wellness activities.

Rationale: Financial Empowerment Interventions are important in preventing, mitigating and reducing poverty.[4] Financial literacy is a key influence in helping people grow their confidence in their decisions about their finances and create stability in their lives.[5] It also improves their financial capability, helping people acquire skills to manage income, expenses, savings, and debt.[6] Recent research reviews of financial literacy initiatives identify 4 promising practices that are the key pillars to our financial wellness programs: trusted program staff offer tailored, accurate content that follow adult learning principles in our embedded financial wellness program.[7]

Indicators:
10 – Financial Literacy / Assets / Debt

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[4] ABLE Financial Empowerment Network. 2017. Financial Empowerment: What it is and how it helps to reduce poverty. ABLE Financial Empowerment. Page 5-6.
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CARYA SOCIETY OF CALGARY
- **Elder Friendly Communities (EFC)**

THEORY OF CHANGE:

Need: Seniors are the fastest growing age group in Calgary[1] and by 2024, the number of seniors aged 65 to 79 years is expected to increase by 35,100 people relative to 2019.[2] An estimated 30 percent of Canadian seniors are at risk of becoming socially isolated.[3] Social Isolation has been linked to a higher risk of other negative issues amongst seniors, including higher risks of deteriorating social skills, increased likelihood of suffering elder abuse, and a higher risk of mental health problems.[4] A growing body of research suggests that lacking in social connections is as big a risk factor to premature death as smoking and alcohol consumption.[5]   Social Isolation is also associated with seniors being undervalued in society, which may contribute to other social issues such as ageism and discrimination.[6]

Goal: To increase social connections for vulnerable older adults and create sustainable elder-friendly communities where older adults are valued, have purpose, can contribute to their communities, and as a result all citizens can thrive.

Strategy: The EFC program is activated in specific neighborhoods with a high proportion of seniors. Our program is designed to provide a spectrum of opportunities using an asset-based community development approach that provides multiple "soft entry points" to connecting, engaging and investing in older adults. We also utilize psychosocial groups to address emerging issues. There are 4 methods used to activate our strategies: 1) outreach and engagement, 2) building connections through interests, strengths and stories, 3) sharing leadership and value with others and 4) learning about aging well, increasing skills and expanding interests. Examples of program opportunities include social and recreational activities, learning and skill building, informal connection groups and volunteering.

Rationale: Neighborhoods or "place-based approaches" can be a catalyst for preventing social exclusion.[7] Preventing social isolation among seniors is heavily influenced by good health, social skills, access to services, feeling connected and valued in relationships, and feeling meaningful to society.[8] Furthermore, social connections and active involvement in groups contribute to reducing loneliness, social isolation and support the aging brain.[9],[10] The mechanisms that underlie successful group programs include peer support, group cohesion and participant empowerment over program content. The literature also supports the specific use of group formats for addressing psychological or social issues that are relevant to group participants.[11]

Indicators: #7 – Participation in Neighborhoods

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CARYA SOCIETY OF CALGARY

- **Older Adult Counselling**

THEORY OF CHANGE:

Need: Calgary's older adult population (age 65 and over) is fast growing age group (ten percent in 2014 and with a projection of fifteen percent by 2042)[1]. Social isolation and mental health challenges are 2 of the top 15 issues faced by older adults whereas social/psychological supports and social connection are identified as 2 of the top essential services[2]. Reducing social isolation continues to be a prime focus of service interventions with older adults because of "the adverse impact it can have on health and well-being[3]." Research demonstrates that depression and social isolation are closely linked[4] and that the experience of a major life change increases an older adult's risk of isolation[5]

Goal: To improve overall quality of life for older adults by providing individual counselling and facilitated group opportunities aimed at increasing social connection, and strengthen their coping skills.

Strategy: Counselling is an effective strategy for assisting people in distress and for minimizing crises. This program offers a unique continuum of care, ranging from short-term individual or family interventions, to group participation, through to community connection. Programs are offered out of all carya sites in the city, on a pay what you can model. Short-term individual counselling is provided in a feedback informed model. Participants have the flexibility of starting with individual counselling or in a group. Group programs generally run for two hours once a week up to 10 weeks. Topics include healthy living, hoarding, anxiety and depression, healthy relationships, and grief and loss, yet are adapted to respond to greatest need. Intentional opportunities to build connections, learn from each other are offered within a group setting. Community linkages are also provided to enable participants to volunteer and participate in educational, community engagement, or neighbourhood-based community development in the city.

Rationale: The approach aligns with the Seniors Age-Friendly Strategy local priority plan (II, A & C)[6.] Eighty per cent of people in distress who receive counselling benefit from it[7]. Systematic research reviews indicate that targeted group sessions can reduce social isolation and loneliness among older adults[8]. Research demonstrates that involvement in productive activities, particularly volunteering, has important societal and individual benefits in the contemporary aging environment[9].   Services and supports provided by the Community Based Organizations can be a critical link in helping older adults remain in the community[10].

Indicators:
7 – Social Inclusion – Participation in Neighbourhood

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CARYA SOCIETY OF CALGARY

- **Family Counselling**

THEORY OF CHANGE:

Need: Family dysfunction places children and youth at serious risk and parental mental health problems (including depression) is one of the key risk factors that can contribute to family instability[1]. The Alberta Adverse Childhood Experiences Survey (AACES) completed in 2013 found that 49 per cent of individuals had experienced "family dysfunction" at some point before the age of 18.[2] Research has resoundingly shown imminent and long-term effects of family breakdown and toxic stress on healthy childhood development, including negative impacts to the trajectory of these young lives. Due to the multiplicity of issues families face, it is imperative that they have ease of access to a resource that can provide a continuum of services aimed at ameliorating these dynamics. This is especially so for families with limited means that would otherwise be unable to access such resources[**2].

Goal: To increase family cohesion and healthy development in families and to mitigate the effects of toxic stress by improving attachment, coping skills, and connection to community.

Strategy: The program uses theoretical foundations drawn from family systems, attachment, trauma informed practice, motivational interviewing, and trans-theoretical models that support positive, healthy change at the individual, group and family system levels. Family counseling always keeps in mind the entire family system, but may focus on individuals, dyads, or triads within the family or the entire family as needed. Research speaks to the importance of therapeutic alliance in any clinical work. Thus, a feedback informed outcome approach is used to evaluate goals and the need for continued services and referrals. On average, people are seen 10 – 12 times over six to eight months for 60- or 90-minute sessions. Evidence-based group strategies are offered over 10 - 12 weeks for up to two hours weekly. These groups decrease isolation and affirm normalcy, allowing for the development of new skills and connections in the safety of a supportive environment. Services are provided at multiple sites in the community.

Rationale: Evidence shows that exposure to toxic stress, family disruption and breakdown, referred to as Adverse Childhood Experiences (ACES), can have lasting, negative effects on health, well-being and life opportunities[3]. Family and group counselling are part of a continuum of family strengthening strategies that enhance knowledge of parenting, child development, parental resilience, social connections, emotional competence, and connections to concrete support. Counselling helps families to learn new ways to engage and manage stressors, while creating environments most conducive to healthy development for families and children of all ages.[4] Family counselling services help caregivers to understand the dynamics of their interactions and fortify their capacity to play a pivotal role in countering these experiences, particularly by creating "stable, responsive, nurturing relationships" in "safe, supportive environments."[5]

Indicators:

#19 – Family Cohesion – Parent / Adult Questions
#38 – Youth – Grades 7-12 – Self-Esteem, Self Confidence, Identity

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CARYA SOCIETY OF CALGARY
- **Prime Time**

THEORY OF CHANGE:

Need: Early childhood is the most pivotal time for brain development: the experiences, connections and relationships built during this time have a lasting impact on a child's life[1]. The parent/child relationship is of foremost importance. When challenges disrupt parenting capacities children are at the highest risk of adverse childhood experiences including poverty, social isolation, and family breakdown[2]. The pandemic has heightened parental stress, social isolation and the effects on mental health and have increased the need for connections and support for families.[3]

Goal: To strengthen families and enhance childhood development using a protective factors, place-based approach.

Strategy: Prime Time is a voluntary, preventative in-home and community-based program for families with children ages 0 to 6. It utilizes the research-informed approach of the Strengthening Families Protective Factors Framework[4] which engages families to build: 1) Parental resilience; 2) Social connections; 3) Knowledge of parenting and child development; 4) Concrete support in times of need, and; 5) Social and emotional competence of children.   These protective factors are built using place-based approaches and multiple entry points. Prime Time is located in carya's *Village Commons* hub which is a key anchor to our community work with families in the surrounding Downtown neighborhoods. Families will build connections, learn, and play in both community and home settings through our continuum of support such as parent/child play groups, peer support groups, parent cafes, as well as home visiting supports.

Rationale: Family resilience is strengthened by systems of support and HOPE (Health Outcomes of Positive Experiences)[5]. Research shows that offering a full-spectrum of positive experiences for families and the communities they belong to contributes to healthy child-development and family well-being and can have a life-long impact on buffering adverse childhood experiences.[6] Social connectedness – relationships and bonds with family and community - mitigates the effects of stress, improves parenting behaviours and is essential to healthy child development.[7];[8]. Social Cohesion, one of the four dimensions of Strengthening Neighbourhoods, is a direct path to better outcomes for children and their families. Parents who attend parenting programs, child-parent activities, and have friends in their communities are more likely to also access community based resources and become involved in their neighborhoods. Further to this, "community hubs are identified as 'promising way to improve neighborhood amenities, programs and services"[9].

Indicators: #7 – Participation in Neighborhoods

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CARYA SOCIETY OF CALGARY
- **Village Commons Hub Activation**

THEORY OF CHANGE:

Need: According to 2016 census data[1] 25% of residents in Downtown East Village are over the age of 65, this is more than double the City average for this age group. Thirty-six percent of households in Downtown East Village are in core housing need meaning they spend more than 30% of total income on shelter. Also, the median total household income in Downtown East Village is $48,913 which is half of the City average. Sixty five percent of residents in Downtown East Village live alone, this is significantly higher than the City average of 24% and the National average of 14%[2]. The risk of social isolation increasing with age is well documented[3] and social isolation can be a result of living in poverty, as well as contribute to the persistence of poverty[4]. According to researchers, lack of social connection heightens health risks as much as smoking 15 cigarettes a day, having an alcohol use disorder and can be twice as harmful to physical and mental health as obesity[5].

Goal: Activate *Village Commons* as a welcoming and inclusive community gathering space supporting local residents to increase social inclusion and belonging by facilitating connections between neighbours and enhancing access to services and supports.

Strategy: Leveraging food, art, social and educational activities, a spectrum of opportunities for East Village residents will be developed and curated using an asset based community development approach that provides multiple "soft entry points" to connecting, engaging and investing in the community. The opportunities are co-developed with residents to respond to the evolving community needs while leveraging available assets. Opportunities can range from social groups; intergenerational opportunities, learning and skill building; social & recreational activities, and volunteering. This program will be further augmented by leveraging other Carya programs/services including; family and seniors outreach, counselling, financial empowerment, seniors' recreation and youth engagement.

Rationale: According to the literature, the key elements of successful community development approaches are that community members are viewed as experts and drivers of change, and are active participants in planning and implementation[6]. Each person finds her or his place in life through community contribution, the framework for community building firmly rests on the identification and mobilization of peoples gifts[7]. In addition, communities also benefit and neighborhoods are enriched when people of all ages get to know one another, they tend to unite around shared goals[8].

Indicators:
Community Development

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[1] City of Calgary. 2016. The City of Calgary Community Profiles, Downtown East Village. Calgary: City of Calgary, Community and Neighbourhood Services.

[2] Cooper, Merrill. 2020. "2020 Update". Positive social ties and vulnerable populations. FCSS Calgary Research Brief 4. Calgary: City of Calgary, FCSS Calgary. Page 2.

[3] Cooper, Merrill. 2020. "Vulnerable seniors." Positive social ties and vulnerable populations. FCSS Calgary Research Brief 4. Calgary: City of Calgary, FCSS Calgary. Page 9.

[4] Samuel, K., et al. 2014. "Social Isolation and its Relationship to Multidimensional Poverty". OPHI Working Papers 80, University of Oxford.

[5] Holt-Lundstad, J., et al. 2015. "Loneliness and Social Isolation as Risk Factors for Mortality: A Meta-Analytic Review". Perspectives on Psychological Science, 10(2). Pages 227-237.

[6] Miller, A., et al. 2015. Social Inclusion of Vulnerable Seniors: A Review of the Literature on Best and Promising Practices In Working with Seniors. Calgary, AB: Constellation Consulting Group. Page 33.

[7] Rans, A, Susan. 2005 "Hidden Treasures. Building Community Connections by Engaging Gifts of others" Northwestern University: Asset Based Community Development Institute. Page 83.

[8] Gentile, Olivia. 2017. "I Need You, You Need Me: The Young, The Old, And What We Can Achieve Together." Washington, D.C.: Generations United & Eisner Foundation.

CARYA SOCIETY OF CALGARY

- **The Way In Program: Older Adult Outreach**

THEORY OF CHANGE:

Need: Vulnerable older adults in Calgary are faced with diverse resources to assist with physical and mental health, housing, home maintenance, finances, transportation, legal rights, and safety. Programs also provide opportunities for learning, contributing to their community, and social interaction. Aging, low income, low education, and language or cultural barriers are associated with social isolation.[1] Access to services and resources help to improve social inclusion, economic self-sufficiency, and community participation.[2] As the Network is decentralized, consistent program delivery, measurement, and response to challenges requires coordination.

Goal: To increase social connections and access to supports and resources for vulnerable older adults.

Strategy: The Way In Program consists of a network of four service providers: Calgary Chinese Elderly Citizens' Association, Calgary Seniors' Resource Society, carya, and Jewish Family Services. Each offers community-based outreach support to older adults across Calgary, including services for specific ethno-cultural groups. Services include assessment; information, referral and connection to resources; assistance with applications for benefits; supportive counselling; case management; advocacy; group activities and workshops; caregiver/ family support; connection to social and cultural programs; and elder abuse intervention in coordination with other community services. Program staff provide centralized access and standardized services, evaluation, coordination, and cultural competency to seniors across the city. Program involvement ranges from six to ten months. The Way In Network Facilitator works within carya, which serves as a backbone organization to convene partner agencies at all levels.

Rationale: When vulnerable older adults "know people to turn to for resources, support, and connections, it helps them to get by or get ahead."[3] The lack of clarity about social isolation in older adults makes defining effective interventions difficult.[4] Research testing a clear definition of the concept and The Way In Network's program focus indicates interventions improved four of six dimensions of social isolation: access to resources; number of acquaintances; feeling supported; and belonging to community.[5] An evaluation of the Way In Program showed 97 per cent of its case management clients obtained the services they were seeking through the referral process provided by the program.[6] Research shows collaborative efforts are enhanced by experienced facilitators.[7]

Indicators:
#15 – Long-Term Decreased Expenses; Increased Income from Sources other than Employment
#16 – Poverty Reduction – Emergency / Short-Term Help

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[1] Nicholson, Nicholas R. 2012. "A Review of Social Isolation: An Important but Under-assessed Condition in Older Adults." The Journal of Primary Prevention 33(2):137-152.

[2] Cooper, Merrill. 2014. "Vulnerable seniors." Positive social ties and vulnerable populations. FCSS Calgary Research Brief 4. Calgary: City of Calgary, FCSS Calgary. Page 8.

[3] Cooper, Merrill. 2014. "The issue." Positive social ties and vulnerable populations. FCSS Calgary Research Brief 4. Calgary: City of Calgary, FCSS Calgary. Page 1.

[4] Nicholson, Nicholas R. 2009. "Social isolation in older adults: an evolutionary concept analysis." Journal of Advanced Nursing 65(6): 1342-1352.

[5] DesCamp, E., J. Hewson et al. 2014. "Reducing Social Isolation in Older Adults Living in Community." Presentation. American Society on Aging Conference. March 14, 2014. San Diego, CA. Page 4.

[6] Gardiner, H., and Associates, Inc. 2010. Evaluation of the Older Adult Outreach and Senior Support Programs. Presentation. Alberta College of Social Workers Conference. March 19, 2010. Edmonton, AB. Page 62.

[7] Weaver, Liz. 2015. "Aligning Multiple Partners in Collective Impact." Washington: The Maternal, Infant, and Early Childhood Home Visiting Technical Assistance Coordinating Center. Page 2.

CARYA SOCIETY OF CALGARY

- **Youth Engagement**

THEORY OF CHANGE:

Need: Adolescence can be a time of discovery, transformation, and growth, it can also be one of the most difficult stages of life. Those difficulties are even greater now, with the social isolation, stress, anxiety and uncertainty brought on by the global COVID-19 pandemic[1]. Research indicates that grades 7-9 are an effective time to intervene with youth to decrease risk factors, increase protective factors, and empower youth to thrive in their teenage years and beyond[2]. The challenges of adolescence are compounded for youth who experience risk factors such as low income, lone-parent family, negative parenting practices and family dysfunction, which increase their risk for future employment problems, poverty, criminal involvement and health problems including addictions[3].

Goal: To empower vulnerable youth and develop social-emotional skills that build a strong sense of self-worth, encourage natural supports and enhance skills to support physical and mental wellbeing in a multi-faceted school and community environment.

Strategy: In partnership with identified middle schools provide 15-month programs with separate options for female and male identifying youth entering grade 8 and shorter term (6-12 weeks) programs for grades six to twelve in a variety of schools in Calgary based on needs identified by school staff. Age-appropriate curriculum incorporates the five core areas of social-emotional learning (SEL)[4], psycho-educational programming that adhere to SAFE principles, and structured active learning opportunities aimed to develop social competence and emotional wellbeing. Session topics are delivered by experienced facilitators and incorporate participant questions/interests and cover topics in-depth such as sexuality, healthy relationships and life skills. Experiential activities are also offered over the summer months. Participants have access to facilitators for individual support for things like decreasing stress, connecting to resources, and identifying/developing natural supports.

Rationale: Research demonstrates that regular participation in programs that are comprehensive, use multiple strategies to increase both knowledge and skills, are active and align with the developmental needs of the participants are effective in preventing the onset or intensity of problems in adolescence.[5] Adolescents face many challenges including coping with sudden changes in their bodies, forming new kinds of relationships[6] and experiencing significant growth and development of the brain[7]. This is also a time when we see a marked decline in self-confidence for girls[8] and an increase in externalizing behavior problems for boys[9]. Offering gender targeted programs are effective as adolescence is a pivotal time of navigation and exploration of ones' identity. Research suggests that well-implemented SEL programming can positively affect a broad range of social, health, behavioral, and academic outcomes,[10] for youth such as: increased problem-solving abilities, increased ability to work well with others, improved mental health, decreased anger/aggression, and increased critical thinking and independence.[11]

Indicators:

#38 – Youth – Grades 7-12 Self-Esteem, Self-Confidence, Identity

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[1] Cost, K.T., Crosbie, J., Anagnostou, E. *et al.* Mostly worse, occasionally better: impact of COVID-19 pandemic on the mental health of Canadian children and adolescents. *Eur Child Adolesc Psychiatry* (2021). https://doi.org/10.1007/s00787-021-01744-3

[2] Coelho, V., Marchante, M., & Jimerson, S. 2017. "Promoting a positive middle school transition: A randomized-controlled treatment study examining self-concept and self-esteem." Journal of Youth and Adolescence, 46(3): 558-569.

[3] Cooper, Merrill. 2020. "Risk Factors". Positive child and youth development. FCSS Calgary Research Brief 1. Calgary: City of Calgary, FCSS Calgary. Page 3.

[4] Greenberg, M. T., Weissberg, R. P., O'Brien, M. U., Zins, J. E., Fredericks, L., Resnik, H., & Elias, M. J. (2003). Enhancing school-based prevention and youth development through coordinated social, emotional, and academic learning. American Psychologist, 58, 466–474.

[5] FCSS Research Brief 1 (2020, February). Positive youth and child development.

[6] Agam R, Tamir S, Golan M (2015) Gender Differences in Respect to Self-Esteem and Body Image as Well as Response to Adolescents' SchoolBased Prevention Programs. J Psychol Clin Psychiatry 2(5): 00092. DOI: 10.15406/jpcpy.2015.02.0009

[7] Teenage brain development | Raising Children Network

[8] Boyce, W., King, M., & Roche, J. 2008. Healthy Settings for Young People in Canada. Ottawa: PHAC. Page 125

[9] Gupta, A. K., Mongia, M., & Garg, A. K. (2017). A descriptive study of behavioral problems in schoolgoing children. *Industrial psychiatry journal*, *26*(1), 91–94. https://doi.org/10.4103/ipj.ipj_39_17

[10] Zins, J. E., Weissberg, R. P., Wang, M. C., & Walberg, H. J. (Eds.). (2004). Building academic success on social and emotional learning: What does the research say? New York: Teachers College Press.

[11] Jones, S., Brown, J., Hoglund, W., & Aber, J. 2015. "A School Randomized Clinical Trial of an Integrated Social-Emotional Learning and Literacy Intervention: Impacts after 1 Year." Journal of Consulting and Clinical Psychology, 78(6): 829-842.

CATHOLIC FAMILY SERVICE OF CALGARY THE
- **Family Enhancement and Resiliency Programming**

THEORY OF CHANGE:

Need: Parental mental health, intergenerational parenting practices, stress, and social isolation impact family stability and childhood development.[1] Significant events, such as the COVID-19 pandemic, exacerbate parental stress. In 2021, 74% of parents felt challenged to balance work and their child's schooling, and 61% expressed they were concerned with managing their child's behaviours, stress levels, anxiety, and emotions during the pandemic[2]. Attachment and social-emotional development are important factors in limiting or reducing the impact of Adverse Childhood Experiences within families[3].

Goal: To reduce family stress and build family resiliency through strengthening parent/child relationships, enhancing family functioning, and developing connections to their community.

Strategy: Programming is multi-faceted, to address the dynamic needs of families. It includes virtual and in-person options of whole family group-based service delivery that is grounded around best practices related to reducing family stress and building family resiliency. The target audience are families with school age children who are seeking to strengthen their family and connect with other families. Program content is provided in a group format over 6 to 9 weeks, where the entire family participates in activities together, and parents have opportunity to connect with each other separately. Opportunities to connect outside of program time is encouraged and facilitated on occasion. The program cycle is dynamic and runs throughout the year with a minimum of three cycles across multiple cohorts of families. Program coordinators maintain a case management mindset, providing support to access natural and professional supports as needed.

Rationale: It is vital to deliver services that are responsive to family needs, building protective factors, developing parenting practices, and strengthening social supports[4].Strengthening parents and families can break intergenerational poverty and social exclusion, or at least reduce risk factors that leave families vulnerable[5]. Engaging families and communities through building protective factors increases family strengths, enhances child development, and reduces the likelihood of child abuse and neglect[6]. Meaningful family activities provide opportunity to strengthen and practice core life skills together, building family resiliency[7]. The communities we live in have a significant impact on our well-being and life chances and developing social connections for vulnerable families develops their protective factors[8][9]. Family Enhancement and Resiliency programming aims to strengthen family cohesion and family functioning, ultimately building more resilient, stronger, families.

Indicators:
19 – Family Cohesion – Parent / Adult Questions

[1] Calgary Neighbourhoods. 2020. Positive parenting and family functioning. (Calgary, AB: Family & Community Support Services, The City of Calgary).

[2] Statistics Canada (2020). Impacts on parents and children. Available from: https://www150.statcan.gc.ca/n1/pub/11-631-x/2020004/s8-eng.htm

[3] Mental Health Commission of Canada. (2021). COVID-19 and early childhood mental health: Fostering systems change and resilience — Policy brief. Ottawa, Canada: Mental Health Commission of Canada. Page 3.

[4] Centre for the Study of Social Policy. Strengthening Families Framework. Website. https://cssp.org/our-work/project/strengthening-families/

[5] Calgary Neighbourhoods. 2020. Positive parenting and family functioning. (Calgary, AB: Family & Community Support Services, The City of Calgary). Page 2.

[6] Centre for the Study of Social Policy [website]. https://cssp.org/our-work/project/strengthening-families/

[7] Center on the Developing Child at Harvard University (2017). Three Principles to Improve Outcomes for Children and Families. Pages 4-5.

[8] Simpson, B., Miller, A., & St. Amant, R. (2010). Community Leaderships Development. Discussions paper prepared for United Way of Calgary and Area and City of Calgary, FCSS. Accessed from: http://bsimpson.ca/reports/community_leadership/community_leadership_development.pdf. Page 1.

[9] Positive Social Ties and Vulnerable Populations. September 2020. (Calgary, AB: Family & Community Support Services, The City of Calgary). Page 6.

CATHOLIC FAMILY SERVICE OF CALGARY, THE
- **Family Counselling**

THEORY OF CHANGE:

Need: Social exclusion is a risk factor that contributes to family instability, mental health concerns, child abuse and neglect as well as crime and unemployment.[1] The Alberta Adverse Childhood Experiences Survey completed in 2013 found that 49 per cent of individuals had experienced "family dysfunction" at some point before the age of 18. This research is clear that repeated exposure to stress and family breakdown has long term negative impacts on healthy child, youth and family development.[2] Access to a continuum of services aimed at mitigating these dynamics is essential for preventing the continuation of intergenerational cycles of social exclusion.

Goal: To increase the social inclusion of vulnerable Calgarians through prevention programming that addresses and increases family functioning and family cohesion while mitigating the negative impact of family disruption and other adverse childhood experiences.

Strategy: Our program focuses upon prevention at the earliest opportunity using evidence-based practices. Theoretical foundations are drawn from family systems and trauma-informed practices utilizing behavioural, cognitive and group approaches to support healthy change at the individual and family level. A key strategy of our prevention counseling program is Functional Family Therapy (FFT), serving families and youth aged 12 to 18 and in special cases as young as 10 years of age. Adherence to model fidelity is critical to success and is measured throughout the program. Offered primarily in-home, this short-term family counselling model occurs over a 3 – 6 month period. Weekly sessions are 60-90 minutes with all family members present as they work through FFT'S 3 phases: 1) Engagement/Motivation to establish rapport and form an understanding of the family dynamics; 2) Relationship assessment and Behaviour Change to increase communication, problem solving and model/practice behavioural techniques; 3) Generalization to increase families ability to positively strengthen their social inclusion all while maintaining a client directed, outcome informed approach. This strategy ultimately results in stronger coping skills and improved family relationships.

Rationale: Families Functioning Together 2019 report showed that FFT participation was associated with improvements in multiple family functioning and mental health domains. Results from the parent & child Family Environment Scale (FES) indicate strong statistical significance while the Youth Outcome Questionnaire (YOQ) indicate strong clinical and statistical significance. Both results demonstrate this model's efficacy in addressing family cohesion, among other positive development and well-being related outcomes, as a means to increasing social inclusion for vulnerable families.[3] More than 30 U.S. evaluations have reported that FFT works in a variety of contexts to prevent or reduce family dysfunction and mental and behavioural problems.[4] This strategy has been demonstrated to improve family functioning more quickly than other types of interventions.[5]

Indicators:
19 – Family Cohesion – Parent / Adult Questions

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[1] Calgary.ca/CSPS/CNS/Pages/FCSS/Funding-framework.aspx/Social Sustainability Framework. Page 6 - 8
[2] McDonald, Sheila, and Suzanne Tough. 2014. The Alberta Adverse Childhood Experiences Survey: 2013. Calgary: Alberta Centre for Child, Family and Community Research. Page 4 – 16
[3] Guyn Cooper Research Associates Ltd. 2019. Families Functioning Together (FFT) Project: Final Evaluation Report. Calgary, AB. Page 31-40
[4] Harnett, D.; et al. 2017. "The effectiveness of Functional Family Therapy for adolescent behavioral and substance misuse problems: A meta-analysis." Family Process, 56(3), Page 607-619.
[5] Turner, C.W.; et al. 2017. "Summary of comparison between FFT-CW® and Usual Care sample from Administration for Children's Services." Child Abuse & Neglect, Page 69, 85-95

CATHOLIC FAMILY SERVICE OF CALGARY, THE
- **Louise Dean Centre**

THEORY OF CHANGE:

Need: Teenagers in low-income families who have low self-esteem, low expectations for the future, a history of family dysfunction, poor parenting, and/or child abuse have much higher rates of adolescent pregnancy.[1] More than 500 babies are born each year to teen mothers in Calgary.[2] Families headed by young single mothers are more likely to endure a cycle of intergenerational poverty and vulnerability, impairing healthy child development.[3] Teen parents are less likely to pursue educational goals and more likely to be unemployed.[4] The strain of parenting along with insufficient resources, knowledge and support impact educational attainment of young parents.[5] Teen mothers are less inclined to stimulate children's development, less likely to talk to and play with their infants, and more likely to use physical punishment.[6]

Goal: To enhance well-being for vulnerable pregnant and parenting teens, and facilitate safe, relationally rich, stable and nurturing family environments for their infant children.

Strategy: Louise Dean Centre (LDC) is a milieu setting offered in partnership with CBE and AHS which offers daily wraparound supports and strategies that target the mother/child dyad, father/partner and extended family/natural supports. Teen parents receive social work assessment and intervention plans. Interventions may include ongoing counselling/emotional support, systems navigation, nutrition-based counselling, basic needs support, transition planning post-graduation, and daily role modelling of responsive relationships throughout their tenure at LDC and 18 months follow-up. The following groups strengthen the client's capacity to parent, live independently, and transition to adulthood successfully: 1) Life Skills Program (5 times/week/semester) targeting executive functioning; 2) Financial Literacy and Matched Savings Programs (12 sessions/year for moms; 5 sessions/2xyear for dads); 3) Pre-natal and parenting classes (daily for moms; 1x/week for 12 weeks for dads); 4) Turning Points program on healthy relationships, mental health and addiction (weekly/one semester/year); 5) Co-parenting Program for moms and dads (12 weekly sessions/1xyear). Further, moms and their children receive specialized onsite childcare (full-time daily).

Rationale: Research shows that early life experiences change brains and vulnerability to health and wellness problems in adulthood. The Centre on the Developing Child points to a set of "design principles" that service providers can use to improve outcomes for children and families.[7] These principles are consistent with research that supports using a wraparound approach to improve outcomes for teen parents and children. These programs help teens develop adult living/life skills, be more responsive parents, provide knowledge and skills to complete their education and pursue employment, and can provide crucial support and linkages to quality childcare, and access to health care and social support networks.[8].

Indicators:
9 – Basic Functional Life Skills

[1] Cooper, Merrill. 2014. "Early, unplanned and lone parenting." Positive parenting and family functioning. FCSS Calgary Research Brief 2. Calgary: City of Calgary, FCSS Calgary. Page 5.

[2] Ibid., p. 5.

[3] Lipman, E.L, M.H. Boyle et al. 2002. "Child well-being in single mother families." Journal of the American Academy of Child and Adolescent Psychiatry, 41: 75-82.

[4] Cooper, Merrill. 2014 "Early, unplanned and lone parenting." Positive parenting and family functioning. FCSS Calgary Research Brief 2. Calgary: City of Calgary, FCSS Calgary. Page 5.

[5] Mollborn, S. (2007). "Making the best of a bad situation: Material resources and teenage parenthood." Journal of Marriage and Family 69(1): 92-104.

[6] Young, T., J. Turner et al. 2004. "Examining external and internal poverty as antecedents of teen pregnancy." American Journal of Health Behavior, 28(4): 361-373.

[77] Center on the Developing Child at Harvard University. 2017. "Three principles to improve outcomes for children and families." Website. http://www.developingchild.harvard.edu.

[8] Simpson, B., and H. Charles. 2008. "Ten-Year Longitudinal Study of Adolescent Mothers and their Children." Calgary: Catholic Family Service and the Public Health Agency of Canada. Page 12.

CENTRE FOR NEWCOMERS SOCIETY OF CALGARY
- **Multicultural Peer Mentorship Program**

Revised 2018 September 10

THEORY OF CHANGE:

Need: Studies identify isolation, marginalization and loss of identity as adverse outcomes newcomers encounter after migrating to Canada. For newcomer professionals, previously established professional, personal and cultural ties are replaced by feelings and experiences of isolation. Low levels of social integration coupled with limited economic and social opportunities continue to create a sense of uncertainty among newcomers. Research suggests a strong correlation between sense of belonging and newcomers' current situations such as employment, health and social life,[1] and it is important to ensure that these new arrivals are well supported in their social and economic integration process.

Goal: To accelerate the social integration of newcomers into the Calgary community.

Strategy: The program uses a community-based partnership approach to support social and economic participation of newcomers in Calgary. Collaborating ethno-cultural partners, supported by the Centre's Volunteer Development program, assist in the recruitment of both mentors and mentees into the program. Group and peer mentoring strategies match one to two mentors to three to fivementees. Established newcomers provide intra-cultural perspectives on transitioning into the Calgary community. The program partners with key mainstream institutions and organizations to provide mentees the opportunity to familiarize themselves with and learn from such organizations. Mentors and mentees commit to a minimum of two sessions per month amounting to a minimum of 10 hours per month over a four-month duration. In all there are two four-month cycles per year. Mentors and mentees participate in group discussions, networking events, field trips and presentations. Supplemental services are also provided by the Centre's settlement and integration services to support the smooth integration of mentees into the Calgary community. Mentees are offered the opportunity to become mentors to youth participating in other Centre for Newcomer's programs. Mentees also have the opportunity to participate in training offered by mainstream organizations and partners from diverse ethnic communities, with the aim of contributing to forging cross-cultural relations and building social capital.

Rationale: Studies indicate that mentoring improves intercultural competencies, promotes community development and subsequently impacts social inclusion.[2] Research on social integration among newcomers also suggests that mentoring has the capacity to not only improve communication skills, but also enhance social insertion and increase visibility of the mentored[3] . A recent CLIP Action Plan on social inclusion notes that trust and solidarity are critical elements to accessing and building relationships among newcomers, which can be facilitated through mentorship/buddy systems.[4] Engagement in professional and cultural activities improves quality of life,[5] increases sense of belonging and social participation among newcomers.[6]

Indicators:
5 – Bridging Social Capital
6 – Social Inclusion – Social Participation
8 – Social Inclusion – Economic Participation; Education & Training / Employment / Income

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[1] Moorthi, Gayatri, Semiyu Aderibigbe, and Heather Schmidt. 2015. Calgary Well-Being Report: Immigrants' Perspectives.
[2] Prieto-Flores, Oscar and FeuGelis, Jordi. 2018. What Type of Impact could Social Mentoring Programs Have: An Exploration of Existing Assessments and a Proposal of Analytical Framework.
[3] Bloksgaard, Lotte. 2010. Integration, Mentoring and Networking.
[4] City of Calgary. 2018. Calgary Local Immigration Partnership Action Plan. 2018-2020.
[5] Gilmour, Heather. 2012. Social participation and the health and well-being of Canadian Seniors.
[6] Moorthi, Gayatri, Semiyu Aderibigbe, and Heather Schmidt. 2015. Calgary Well-Being Report: Immigrants' Perspectives.

CENTRE FOR NEWCOMERS SOCIETY OF CALGARY
- **Volunteer Development Program**

THEORY OF CHANGE:

Need: The immigrant population in Calgary is projected to reach nearly half a million by 2020,[1] a situation that continues to challenge how integration is realized. Among others, factors identified as negatively influencing integration include social isolation, knowledge of cultural values, lack of language proficiency and lack of knowledge on information on employment.

Goal: To facilitate the participation of newcomers, newcomer community groups, and established communities and institutions to work collaboratively towards meaningful integration of newcomers into Canadian society.

Strategy: The VDP recruits new immigrants and established Calgarians through advertising at the volunteer centre, on-line, and at large group presentations for volunteer positions. A Volunteer Resource Fair occurs annually to highlight potential volunteer opportunities. Structured training and seminars that prepare newcomers and mainstream volunteers for effective volunteer engagement are offered for two hours a week, on an average of 40 times each year. Examples of volunteer opportunities for established Calgarians include roles in volunteer-led ESL training, conversation clubs, and computer literacy training. Newcomer volunteers may work in classrooms, engage in school activities, volunteer at festivals and engage with other newcomer families in their settlement and integration process. Volunteers are typically involved with the program for eight weeks. The VDP supports the Multicultural Peer Mentorship and the Real Me program to recruit, train and orientate mentors and mentees. The VDP organizes annual celebration/appreciation events for all volunteers of the Centre as part of the programs recognition of volunteer efforts in building a socially cohesive community of Calgary.

Rationale: "Canadians view the contribution of volunteer groups as having the biggest impact on the quality of life in their communities."[2] Numerous studies point to the relationship between volunteering and social inclusion among newcomers including studies that acknowledge that individuals who are meaningfully engaged in activities such as volunteering experience positive outcomes for health, well-being, and integration. Such participation is a reflection of a person's attachments to the society in which they live.[3] Newcomers who volunteer build stronger bonding and bridging social capital as well as increase their sense of belonging that results from trust. In addition, engaging newcomers in formal volunteer roles in communities, organizations, and professional groups makes them essentially part of the communities or organizations which also fosters a sense of belonging and a sense of social purpose among newcomers.[4]

Indicators:
5 – Bridging Social Capital
6 – Social Inclusion – Social Participation

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[1] City of Calgary. 2011 [as per website]. Diversity in Calgary: Looking Forward to 2020. Fact Sheet. Calgary: City of Calgary, Community & Neighbourhood Services, Social Policy & Planning. Page 2.
[2] Strategic Counsel. 2005. National Overview of Findings from a National Survey on the Quality of Life in Canadian Communities. Ottawa: Infrastructure Canada, Cities Secretariat. Page 3.
[3] Moorthi, Gayatri, Semiyu Aderibigbe, and Heather Schmidt. 2015. Calgary Well-Being Report: Immigrants' Perspectives. Calgary: Calgary Local Immigration Partnership. Page 43.
[4] Southwest Community Resource Centre. 2011. Understanding the Role of Volunteerism in Creating Social Inclusion.

- **Advancing Healthy Relationships**

Revised 2018 July 05

THEORY OF CHANGE:

Need: Across cultures and communities, social norms govern ideas and behaviours related to sexuality and gender. When knowledge is limited and based on fear and shame, there is a lack of understanding and acceptance of sexuality as integral to positive human development. Sexual health is often excluded as a key determinant of health and well-being in social services, health, and education. Negative attitudes and behaviours result in a range of health and social issues including costly sexually transmitted infections[1], sexual assault, discrimination, and domestic violence.[2] Marginalized populations are at particular risk of not having access to information and education about sexual wellbeing that meets their specific needs[3] .

Goal: To ensure all Calgarians, human service organizations, and relevant systems have the supports and resources needed for individuals to achieve sexual well-being across the lifespan.

Strategy: Advocacy occurs at multiple levels to change cultural attitudes about sexuality, including direct service provision, professional training, and comprehensive policy and systems change. By collaborating with individuals, sectors, and systems, the Centre advances a prevention-focused sexual wellbeing agenda locally and provincially. Staff work with organizations to audit, develop policies and provide training to ensure inclusive, effective, and sensitive services are provided. On average, 12 organizations are supported each year. This work then informs the Centre's broader public policy work with governments to advocate for new, enhanced, and modified policies. Examples include advocating for comprehensive sexual health education in Alberta, advocating for the rights of gender and sexually diverse youth and adults, and working with service providers to ensure the sexual health rights of older adults and people with disabilities are effectively integrated into organizations. This work is carried out by Training Centre Facilitators, Adult Community Programs Facilitator, and our healthy public policy team, inclusive of the President & CEO and Director of Programs.

Rationale: Two models inform our rational, including: Social and Ecological Model (SEM) of Health Promotion, and COM-B Systems Model. SEM includes five nested, hierarchical levels: individual, interpersonal, community, organizational, and policy. "The most effective approach to public health prevention and control uses a combination of interventions at all levels of the model" (p.2).[4] The COM-B Systems Model contends behaviour change results from an interaction of *capability* to perform the behaviour, *opportunity* to perform the behaviour, and *motivation* to carry out the behaviour. Sexual health programs, practices, and policies addressing vulnerable populations should not only focus on reproductive health practices and disease prevention but also on creating and supporting environments where self-esteem related to sexuality can flourish and where systemic inequalities are addressed.[5]

Indicators:
Policy or Systems Change

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1 Government of Alberta. Alberta Sexually Transmitted Infections and Blood Borne Pathogens Strategy and Action Plan, 2011-2016. Edmonton: Alberta Health and Wellness, Community and Population Heath Division. Page 2.
2 Wells, Lana, Casey Boodt, and Herb Emery. 2012. "Preventing Domestic Violence in Alberta: A Cost Savings Perspective." The School of Public Policy, SPP Research Papers 5(17): 6-7.
3 Public Health Agency of Canada. 2008. Canadian Guidelines for Sexual Health Education. Ottawa: Public Health Agency of Canada. Page 8.
4 UNICEF (n.d.). MODULE 1: Understanding the Social Ecological Model (SEM) and Communication for Development (C4D). Available at: https://www.unicef.org/cbsc/files/Module_1_-_MNCHN_C4D_Guide.docx (retrieved June 17, 2017).
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CENTRE FOR SEXUALITY SOCIETY

- **WiseGuyz**

THEORY OF CHANGE:

Need: As adolescent boys age, they face increasing pressures from conventional gender norms that restrict their expression of emotions and to sustain deep and meaningful connections with peers. Conventional gender norms influence "young men and boys [to] learn that the ideal man, a real man, is tough, unemotional, powerful, dominant, uncompromising and in control. This concept of masculinity is not only limiting and dated, it's also dangerous."[1] Issues related to male power and privilege have been recognized as major factors in predicting the perpetration of violence against women.[2] There is a need for programming that helps adolescent boys to recognize and deconstruct gender norms that perpetuate harmful forms of masculinity within themselves and in their relationships.

Goal: To engage adolescent boys in critically analyzing the social constructs of gender norms, which helps them to develop and sustain healthy and equitable relationships.

Strategy: WiseGuyz is a participatory school-based program for boys in Grade 9 who are 14-15 years old and is offered in Calgary Junior High School. The program is also offered in community-based programs for boys between the ages of 12-18. WiseGuyz has four core tenants: reducing homophobia; exploring emotionality; increasing empathy and fostering of allyship. The foundation of the program is an integrated curriculum comprised of four core modules which are sequenced so each build on the next. Module 1 focuses on Healthy Relationships; Module 2 explores sexual health; Module 3 explores gender, sexuality and the media and Module 4 addresses advocacy and leadership. Each school-based program session is 1.5 hours long and takes place once a week during school hours and runs over the entire school year. Community based programs run 1.5-3 hours, dependent on the program site and runs from October-May, or quarterly if the program has longer session times.

Rationale: Six years of research on the WiseGuyz program has shown it is demonstrating statistically significant improvements in boys' behaviours in the areas of sexual health efficacy, healthy masculine norms, and decreased homophobia.[3] WiseGuyz is informed by best practices of: male responsibility; group-based participatory learning; healthy relationship curricula; and youth approaches to the prevention of violence. Targeting adolescent boys at their natural and social age of curiosity about relationships is a critical strategy in creating healthy sexuality and relationships in their youth.[4] By understanding and experiencing the four core tenants of WiseGuyz, the boys are able to integrate compassion, emotion, empathy, and critical thinking into their behaviour and in their relationships.[5]

Indicators:
38 – Youth – Grades 7-12 – Self-Esteem, Self-Confidence, Identity

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[1] Minerson, Todd, Humberto Carolo, Tuval Dinner, and Clay Jones. 2011. Issue Brief: Engaging Men and Boys to Reduce and Prevent Gender-Based Violence. Toronto: White Ribbon Campaign. Page 9.
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[3] Hurlock, Debb. 2016. "Boys Returning to Themselves: Healthy Masculinities and Adolescent Boys". WiseGuyz Research Report #3. Calgary: Calgary: Creative Theory Consulting Inc. Pages 7-8.
[4] Wolfe, David, Claire Crooks, Peter Jaffe, et al. 2009. "A School-Based Program to Prevent Adolescent Dating Violence: A Cluster Randomized Trial." JAMA Pediatrics (formerly Archives of Pediatric and Adolescent Medicine) 163(8): 692-699.
[5] Hurlock, Debb. 2013. Re-imagined Masculinities: Unfolding the Meaning and Effect of the WiseGuyz Program. Calgary: Creative Theory Consulting Inc. Page 11.

CHILDREN'S COTTAGE SOCIETY OF CALGARY, AN ALBERTA SOCIETY, THE
- **In-Home Infant Respite Care Program**

Revised 2021 November 17

THEORY OF CHANGE:

Need: The 2018 census data released by The City of Calgary shows Calgary's population at 1,267,344 individuals, up 21,007 from the previous year[1]. The combination of increased births and newcomers to Calgary will increase the number of new parents who are parenting in isolation and are vulnerable to stressors. This combination of social isolation and increased parental stress has a detrimental impact on family cohesion, healthy family functioning, positive parenting, and early child development. For at risk parents social isolation is associated with challenges ranging from poverty to in some cases child abuse[2].

Goal: Provide parents with infants younger than six months with respite care in their homes in times of vulnerability to maintain and strengthen the family unit. Enhance parents' social competence by way of increased self-esteem, social skills and sense of identity, increase their social inclusion and decrease the chance of child abuse or maltreatment.

Strategy: In-Home Infant Respite Workers provide families with an infant(s) under the age of six months who are experiencing vulnerability with direct support in their homes. The intensity of the service is moderate to high, ranging from 3 to 12 hours per week for a maximum of six months, based on each family's situation. Service may include rest for an exhausted primary caregiver, coaching and modelling of healthy parenting and child care skills for an inexperienced parent along with connection to community resources.

Rationale: Respite is a significant form of social support[3]. The use of respite as a means of social support decreases parental stress, improves parent-child relationships, decreases the risk of child abuse, and reduces social isolation[4]. The strongest potentially modifiable risk factor contributing to the development of behavioural and emotional problems in children is the quality of parenting a child receives. Evidence from behaviour genetics research and epidemiological, correlational, and experimental studies shows that parenting practices have a major influence on children's development[5]. Strengthening families and supporting positive parenting are effective means of preventing the intergenerational cycle of poverty and social exclusion[6].

Indicators:
9 Basic Functional Life Skills

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[1] City of Calgary. 2018 Civic Census Results. Calgary: City of Calgary, Elections and Census Office. Page 4.

[2] Cooper, Merrill. 2014. "Positive social ties and vulnerable populations." FCSS Calgary Research Brief 4. Calgary: City of Calgary, FCSS Calgary. Page 2.

[3] MacDonald, H., and P. Callery. 2004. "Different meanings of respite: a study of parents, nurses and social workers caring for children with complex needs." Child: Care, Health and Development 30(3): 279-288.

[4] Strunk, Julie. 2010. "Respite Care for Families of Special Needs Children: A Systematic Review." Journal of Developmental and Physical Disabilities 22(6): 615-630.

[5] Collins WA, Maccoby EE, Steinberg L, Hetherington EM, Bornstein MH. Contemporary research on parenting: The case for nature and nurture. *American Psychologist* 2000; 55(2):218-232.

[6] Cooper, Merrill. 2013." Positive parenting and family functioning" FCSS Calgary Research Brief 2. Calgary: City of Calgary, FCSS Calgary. Page 4.

CLOSER TO HOME COMMUNITY SERVICES SOCIETY

- **CAS, Critical Hours**

THEORY OF CHANGE:

Need: Research has shown that between the hours of 3 p.m. to 6 p.m., often referred to as "the critical hours", adolescents are at significantly higher risk of getting involved in crime, alcohol, drugs, vandalism and others risky behaviour, than at other times. According to *A Profile of Young Offenders in Calgary: An Interim Report*, in 2006, 24 per cent of chargeable incidents involving youth took place during these hours. These offenders demonstrate little involvement in clubs and activities, tend to gravitate towards negative peers whom they meet on the streets or in jail, and have little investment in school[1].

Goal: To increase the involvement of school-aged children and youth, particularly those who have been identified as vulnerable and at risk of becoming involved in negative community activities, in programs between 3 p.m. to 6 p.m. The intention is to teach these children academic and social skills and minimize the future need for larger system interventions.

Strategy: The KidsConnect format teaches academic and social skills and provides recreational opportunities for children and youth from North Central communities. The program runs weekly for 10 to 12 weeks, between 3 p.m. and 6 p.m. The CAS Program is delivered using SAFE (Sequenced, Active, Focused, Explicit) best practice guidelines. Research "shows that programs must be intentional to be effective. Program "intentionality" means programs includes specific outcomes and uses an evidenced-based skills-training approach to develop particular competencies or attitudes associated with those outcomes."[2] The families of the children in these programs face challenged around basic needs insecurity, isolation, poverty, mental health challenges and family violence. These programs provide protective factors to the children in the face of these risks.

Rationale: Prevention program such as after school, when intentionally design have been effective.[3] The research shows that "for vulnerable children and youth, participation in developmental programming can afford protective or "buffering" factors that can offset multiple risk factors".[4] Therefore, programs delivered during this time frame will provide youth with opportunities to engage in positive social activities and will employ specific components to strengthen the participants' emotional well-being, academic skills, and community connections.

Indicators:
34 – Children – Grades 4-6 – Self-Esteem, Self-Confidence, Optimism

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[1] MacRae, Leslie et al. A Profile of Youth Offenders in Calgary: An Interim Report. Canadian Research Institute for Lawand the Family. March, 2008.
[2] "FCSS Calgary Research Brief: #4 Outcome: Positive Youth and Child Development, p. 6.
[3] 'FCSS Calgary Research Brief: #4 Outcome: Positive Youth and Child Development, p. 3.
[4] 'FCSS Calgary Research Brief: #4 Outcome: Positive Youth and Child Development, p. 4.

CLOSER TO HOME COMMUNITY SERVICES SOCIETY
- **Family Diversionary**

THEORY OF CHANGE:

Need: Current research shows that parenting is the most important public health issue in our communities. Further, it is the most important variable in the future outcomes of children and youth.[1] "Limited access to basic resources, unstable environments, inter-spousal conflict and economic strain are factors that individually and collectively threaten healthy family functioning".[2]

Goal: To equip families with skills that help them set family goals, find needed resources and natural supports, specifically to incease positive social ties, and improve parenting skills so they can successfully keep their families together.

Strategy: The program provides essential support functions to reduce isolation and connect families to the community. It also provides education on parenting skills to prevent future problems among family members "By reducing the risk factors that threaten family stability and well-being, and supporting programs and conditions that assist vulnerable families, will give all children, in this generation and those that follow, a better chance of health, happiness and success."[3] These services help parents with parenting skills, problem-solving abilities, and dealing with crises, and support parents in addressing the emotional, social, health, and behaviour issues of their children. The program helps parents successfully manage daily living, access employment opportunities, and help their children with school readiness and school performance issues. Specific strategies to achieve the outcomes include one-on-one family support at the North Central Family Resource Network or in the home, school or community. Programs are also offered in a group setting to teach parenting and life management skills, build social connections, and decrease isolation. These programs are offered in a number of communities with a focus on areas of low income families. "Low-income familes tend to be socially isolated, and reduced social support restricts the ability of family and community to buffer the direct effects of poverty". [4] Programs are designed so that participants can attend more than one simultaneously and remain invloved for long periods of time. It is widely agreed that both bonding and bridging social capital are essential to a successful integration process: "It is through networks that immigrants expand their social and economic opportunities in the receiving country [5] "Scores of studies have investigated the ways in which socially isolated families can benefit from positive social ties and strengthened social support systems, and an extensive body of research documents the benefits of both formal and informal community supports."[6] These include a women's support group, parenting classes, financial security supports and others. Program participation generally lasts 10 months but longer participation is seen as positive for ongoing family cohesion.

Rationale: Research shows that all parents benefit from positive social support systems. For low-income, isolated families, quality support systems can dramatically improve positive parenting skills, family functioning, and positive child outcomes. By strengthening family social networks, parents are more likely to become contributing members of the community, which decreases the chances that children will engage in high-risk behaviours

Indicators:
04 – Positive Social Ties/or Bonding Social Capital

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[1] Positive Parenting and family functioning – FCSS Calgary Research Brief No 2 City of Calgary. FCSS. Page 1.
[2] Kaiser, A.P.; Delaney, E.M. 1996. "The effects of poverty on parenting young children." *Peabody Journal of Education,* 71(4), 66-85.
[3] Positive Parenting and family functioning – FCSS Calgary Research Brief No 2 City of Calgary. FCSS. Page 3.
[4] Positive Social ties and vulnerable populations – FCSS Calgary Research Brief No. 4 City of Calgary FCS. Page 5.
[5] Kunz, J.L. 2003. "Social capital: A key dimension of immigrant integration." *Canadian Issues,* April, 33-34.
[6] Positive Social ties and vulnerable populations – FCSS Calgary Research Brief No. 4 City of Calgary FCS. Page 5.

COMMUNITY KITCHEN PROGRAM OF CALGARY SOCIETY

- **Calgary's Cooking Program**

THEORY OF CHANGE:

Need: Food insecurity and poverty is an issue that resonates with millions of Canadians. Food insecurity and poverty can affect adults, children, seniors, families and communities. Calgary is still growing despite the downturn in the economy. This, coupled with the increasing unemployment rates in our region, are negatively influencing food security. The Calgary Herald on March 24, 2016 said that experts are sounding the alarm on the food insecurity in Canada.[1] A lack of savings and high levels of debt affect Calgary families and a significant number worry about not having enough money for housing or food.[2] 40 per cent of single parents and 23 per cent of couples with children reported they do not have enough money for food.[3] One in five families worry about not having enough money for food.[4]

Goal: To work with low-income and vulnerable Calgarians in the development of skills to enable them to select, plan, and prepare healthy meals that are affordable.

Strategy: Calgary's Cooking Program brings individuals together, creating opportunities for social interaction and the development of an understanding of the impact of food choices on individual health and positive outcomes. Participants are referred through resource fairs, social services agencies, churches, and self-referral. In this community-based cooking program, groups of people contribute resources and cook in bulk. Cooking skills, food handling, menu planning, and the economical purchasing of food are part of the curriculum. The program operates across all four quadrants of the city in churches, community halls, and institutions. Sessions run for 10 hours per week each month from September to June.

In the fall of 2016, Calgary's Cooking program made a further outreach into culturally diverse communities with different ethnic backgrounds and immigrants. We are working with them to establish new kitchens and bring them into the fold of our already established kitchens, as well as to teach them how to cook the different foods we have in Canada, while learning from them some of their recipes to incorporate into our program.

Rationale: Research shows that collective kitchens may improve household food security, reduce social isolation, and increase social supports[5]. Bringing together participants with similar life circumstances and facilitating social interactions among them creates a structure that can help to reduce social isolation among participants in Calgary's Cooking Program. The process of bulk purchasing and cooking results in many meals being prepared while establishing a substantial cost savings that would not be possible on an individual basis.

Indicators:
4 – Positive Social Ties and/or Bonding Social Capital
17 – Food Security

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[1] Heidi Westfield reported. "Experts sound alarm on food insecurity." Calgary Herald. 2016 March 24. Accessed online.
[2] Calgary Poverty Reduction Initiative. 2013. Enough for All: Unleashing our Communities' Resources to Drive Down Poverty in Calgary. Final Report of the Calgary Poverty Reduction Initiative, Vol. 1. Calgary: City of Calgary and United Way of Calgary and Area. Page 1.
[3] Gilmour, L., D. Cook, M. Van Hal, and C. Vall. 2011. Signposts II: A Survey of the Social Issues and Needs of Calgarians. Calgary: City of Calgary, Community & Neighbourhood Services, Social Policy & Planning, and United Way of Calgary. Page 28.
[4] Calgary Poverty Reduction Initiative. 2013. "Few Facts." Enough for All: Unleashing our Communities' Resources to Drive Down Poverty in Calgary. Final Report of the Calgary Poverty Reduction Initiative, Vol. 1. Calgary: City of Calgary and United Way of Calgary and Area. Page 7.
[5] Cooper, Merrill. 2009. "Social Isolation." Outcome: Adult personal capacity and individual and family economic self-sufficiency. FCSS Calgary Research Brief No. 3. Calgary: City of Calgary, FCSS Calgary. Page 5.

CONFEDERATION PARK 55+ ACTIVITY CENTRE

- **Seniors Programs**

THEORY OF CHANGE:

Need: In 2017, 11 per cent of Calgary's population was aged 65 or older, with a 23 per cent population increase projected to occur by 2022. The population aged 75 or older is expected to grow by 14 per cent during the same period. Risk factors associated with social isolation among seniors include age over 75, low income, living alone, health or mobility difficulties, and language or cultural barriers. Currently, 26 per cent of Calgary seniors live alone and almost 40 per cent of unattached Calgary seniors live in poverty.[1]

Goal: To promote social connections and reduce social isolation among seniors by providing programs and services that are accessible, affordable, and account for health, mobility and cultural considerations. Seniors programs are intended to promote and enable physical, mental, and social engagement within the community.

Strategy: Social connectedness is associated with better physical and mental health, quality of life, and longer life.[2] Seniors centres across the city offer social, educational, recreational, and leisure programs and activities for seniors aged 65 and older. Programs are coordinated by trained staff and, where possible, are designed with local seniors to respond to preferences for social and community engagement and supports; provide physical activity and recreation for seniors of diverse interests and abilities; and create an inviting and inclusive space for connecting to important community supports for seniors. Programming is ongoing and flexible to respond to needs and interests as they are identified. Centres are open year-round on weekdays, as well as some Saturdays and some evenings to host monthly or bi-weekly socials or special events.

Rationale: Social isolation in the seniors' population can be prevented and reduced by enhancing protective factors such as social ties (including with younger friends and neighbours), good health, creative expression, and communication skills. Community engagement can be facilitated with accessible services, access to transportation, and opportunities to take up meaningful roles in society.[3] Programs that capitalize on seniors' experiential knowledge and affirm and enable opportunities for reciprocity, feeling valued, and making meaningful contributions contain the psychological preconditions for building social ties. Best practices include group programs with an educational or training component, intergenerational programs, gatekeeper programs, volunteer opportunities and targeted social or support activities, which can be tailored to participant health and activity limitations.[4] Programs should be facilitated by quality trained staff and enable participant involvement in program design, implementation, and review.[5]

Indicators:
4 – Positive Social Ties and/or Bonding Social Capital
6 – Social Inclusion – Social Participation

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[1] The City of Calgary, Calgary & Region Economic Outlook, Spring, 2018.

[2] Austin, C., R. McClelland, J. Sieppert, and E. Perrault. n.d. The Elder Friendly Communities Project: Understanding Community Development and Service Coordination to Enhance Seniors' Quality of Life. Calgary: University of Calgary, Faculty of Social Work. Page 20.

[3] Edwards, P. and A. Mawani. 2006. Healthy Aging in Canada: A New Vision, A Vital Investment From Evidence to Action. Ottawa: Federal/Provincial/Territorial Committee of Officials (Seniors), Healthy Aging and Wellness Working Group. Pages 17-18.

[4] Cooper, Merrill. 2009. "Vulnerable Seniors." Outcome: Positive Social Ties and Vulnerable Populations. FCSS Calgary Research Brief No. 4. Calgary: City of Calgary, FCSS Calgary. Pages 12-15.

[5] Cattan, M., M. White, J. Bond, and A. Learmouth. 2005. "Preventing Social Isolation and Loneliness among Older People: A Systematic Review of Health Promotion Interventions." Ageing and Society 25: 41-67. Pages 57, 61.

CONNECTIONS FOR FAMILIES SOCIETY

- **Financial Coach Program**

THEORY OF CHANGE:

Need: Financial Coaching is offered to families in which a parent/parents have cognitive challenges. Most of these families are dependent on AISH and living in poverty, and therefore challenged to maintain a safe and stable home for their children. Without this stability, families are at risk of Children's Services intervening and removing their children. While Children's Services will cite the disability as the reason for intervention, it is as or more likely to be poverty that causes the family to struggle.

Goal: Parents with cognitive challenges will have improved financial well being, and feel more confident in their ability to manage financially with increased confidence in their parenting, because of the supports of Connections' Financial Coach.

Strategy: Financial Coach strategies encourage parents to improve their ability to maintain a stable household for their children, reduce their parenting stress, and be viewed as a good parent, by addressing their financial well-being. Like all of Connections' support, Financial Coaching is strengths-based, highlighting what parents do well and how resourceful they are, and then offering to help them do even better. Connections supports families life-long, which allows the Financial Coach to take time to build trust and relationships, then to offer a broad range of program elements to all members of the family with opportunity for repetition and reinforcement. Programming is offered during the workday plus evenings and weekends, in the family's home or in the office, one-on-one, and in small and larger group formats. This variety ensures our supports meet the families where they are and maximizes access to supports that are comfortable and work for them. Cyclically, the tax year creates check-in points and life stages (i.e. a new baby, planning for retirement) trigger opportunities to introduce financial planning and improve stability. Financial education and skills development are offered indirectly by arming Connections' In-Home team with resources to share with families.

Rationale: Key research indicates that people with disabilities are at risk for social exclusion[1] and serious long-term financial deprivation (i.e. low employment, under-employment, poor pay). Some researchers conclude that learning potential can be realized when education is provided with enough support/repetition and in settings that work for the individual, and in formats that match the individual's learning style[2] (i.e. hands-on demonstration and visual presentation). As well, "widespread agreement" in the research community points to low financial literacy linked to personal financial crisis and financial victimization by predatory lenders.[3] Research also shows that financial literacy initiatives are effective to link individuals to government benefits.[4] Matched savings programs are proven to support low income families realize savings, and encourage future savings. [5]

Indicators:
14 – Individual / Family Poverty – Perceptions

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[1] Burstein, M. 2005. "Combatting the Social Exclusion of At-Risk Groups" (Ottawa, ON.: Government of Canada, Policy Research Initiative

[2] Clark, M.A. 2006. "Adult education and disability studies, an interdisciplinary relationship: Research implications for adult education." Adult Education Quarterly, 56(4), 308-322, p. 311

[3] Social and Economic Development Innovations (SEDI) 2004. "Financial Capability and Poverty. Discussion Paper. (Ottawa, ON.: Government of Canada, Policy Research Initiative) p. 8

[4] Robson, J. 2012. "The Case for Financial Literacy: Assessing the Effects of Financial Literacy Interventions for Low Income and Vulnerable Groups in Canada. (Toronto, ON.: Canadian Centre for Financial Literacy, Social and Enterprise Development Innovations (SEDI)

[5] Asset building/matched savings: www.sedi.org/html/programs/faqAssetsBuilding.asp

CUPS CALGARY SOCIETY

- **CUPS Family Development Centre**

THEORY OF CHANGE:

Need: A key risk factor for poor developmental outcomes in children is family low income.[1] Currently, 8.1-8.9% of Calgarians live in poverty[2] and 5% of children live in poverty in Alberta.[3] Twelve per cent of Albertans have reported four or more Adverse Childhood Experiences;[4] furthermore, families living in poverty are at greater risk for Adverse Childhood Experiences. [5] The average ACE score of CUPS clients is 5. Studies clearly indicate a relationship between adverse childhood experiences such as neglect, and short-term and long-term harmful effects on cognitive, social-emotional, and behavioural development. [6] [7]

Goal: To reduce instances of childhood trauma, toxic stress, and improve family functioning and parenting skills so children can develop essential skills that lead to positive later-life outcomes.

Strategy: This program helps parents, children, and families who are struggling with issues related to poverty build resilience in their lives. CUPS Family Development Coaches take a trauma-informed approach to mitigate the harmful effects of toxic stress to create a safe nurturing environment for parents and children. Nurturing Parenting curriculum is delivered in group and individual formats with time for guided parent-child interaction time. Family Development Centre services and resources increase a family's stability and decrease toxic stress in the home, thereby building resilience in children and their parents, leading to success in later life. Each Family Development Coach has a caseload of 10-12 low-income vulnerable families.

Rationale: Research states that the most effective ways to prevent poor developmental outcomes in children are to "increase income levels of poor families and to improve parenting practices and family functioning in fragile families."[8] Through integrated care, CUPS provides wraparound services in all areas of an individual and family's wellbeing, including income and finances. Our programs align with research stating that "nurturing and stable relationships with caring adults are essential to healthy human development beginning from birth."[9] CUPS Family Development Centre takes a two-generational approach to promote positive parenting practices and minimize toxic stress for families living in poverty.[10]

Indicators:
19 – Family Cohesion – Parent / Adult Questions
20 – Parenting – Parent Questions

[1] Family and Community Support Services, 2014. Research Brief 1: Positive Child and Youth Development
[2] Vibrant Communities Calgary, 2018. Poverty in Calgary: A picture of the incidence and experience of low income in Calgary and area. http://vibrantcalgary.com/wp-content/uploads/2018/06/Poverty-in-Calgary.jpg
[3] Statistics Canada, 2017. Canadian Income Survey
[4]http://www.research4children.com/data/documents/2015-06jun- 10_sheila_mcdonald_and_suzanne_tough _ab_ace_ presentation_ab_ace_survey.pdf
Internal CUPS survey indicates 60% have 4 or more ACE scores.
[5] Wade, Roy , Judy A. Shea, David Rubin and Joanne Wood. 2014. PEDIATRICS Volume 134, Number 1, July 2014:13-18.http://sanctuaryweb.com/Portals/0/2016%20PDFs/ACEs/Wade%20et%20al%20Adverse%20childhood%20experiences%20urban%20youth.pdf
[6] Hildyard, K. L., & Wolfe, D. A. 2002. Child neglect: Developmental issues and outcomes☆. Child Abuse & Neglect, 26(6-7), 679-695. doi:10.1016/s0145-2134(02)00341-1
[7] Harvard Center on the Developing Child, 2010. The Foundations of Lifelong Health Are Built in Early Childhood.
[8] Family and Community Support Services, 2014. Research Brief 1: Positive Child and Youth Development
[9] National Scientific Council on the Developing Child. (2004). Young children develop in an environment of relationships. Working Paper No. 1. Retrieved from http://www.developingchild.net
[10] Cooper, Merrill, 2013. Positive Social Ties. Calgary, AB: Family & Community Support Services, The City of Calgary.

DEAF & HARD OF HEARING SERVICES CALGARY REGION SOCIETY
- **Peer-to-Hear**

THEORY OF CHANGE:

Need: According to the Statistics Canada, 40% of adults aged 20 to 79 had at least slight hearing loss in one or both ears. Older adults were significantly more likely to have hearing loss (78%) compared with adults aged 40 – 59 (40%)[1]. This can result in depression/anxiety and risk of social isolation[2]. Effective communication is difficult, and employer attitudes create the largest single barrier to employment opportunities.

Goal: To eliminate factors that contribute to the negative effects of hearing loss[3], such as limiting employment opportunities and social activities by learning from a peer who has lived experience both in social and workplace settings.

Strategy: Using one-on-one and small group mentoring approaches, supportive relationships between individuals with hearing loss (mentees) and volunteer mentors who have lived experience are created. Mentors are comfortable in their interactions with family, friends and in the workplace, managing communication strategies. The mentors are trained on empathic listening skills and are individuals who have self-identified as struggling with one or more aspects of socialization due to their hearing loss. Once matched based on experience, participants remain in the relationship for 3 months, meeting weekly for approximately one hour. As the mentee's confidence increases, individuals make better use of their skills and abilities and continue to build their social - community networks. In the small group mentoring sessions, the mentor and coordinator meet on-site. These meetings share challenges and give practical tips and strategies that will help with the day to day anxieties that accompany hearing loss.

Rationale: Peer support is founded on the principles of respect, shared responsibility, and mutual understanding. Results of a comprehensive literature review suggest that peer support workers are more equipped than professional staff. Through interaction with others, the process of normalization[4] begins. Individuals who fail to learn to manage their hearing loss experience decreased quality of life and risk social isolation. Individuals with hearing loss experience greater difficulties in employment transition and career development compared to their hearing counterparts. Studies have shown statistically significant evidence of the benefits of peer support in managing chronic health conditions[5]. Peer support is a powerful tool in helping people meove from passivity to active engagement in self-management.[6]

Indicators:
 # 4 - Positive Social Ties and/or Bonding Social Capital
 # 6 - Social Participation

[1] Statistics Canada. 2012/2013. Hearing loss of Canadians. Ottawa: Government of Canada.
[2] Mick, Paul & M. Kathleen Pichora-Fuller (2016) Is Hearing Loss Associated with Poorer Health in Older Adults Who Might Benefit from Hearing Screening Ear & Hearing
[3] Dalton, Dayna, David M. Nondahl et al. (2003). The impact of hearing loss on quality of life in older adults.The Gerontologist
[4] Gagné J-P, Southall K, Jennings MB. (2011). Stigma and Self-stigma Associated with Acquired Hearing Loss in Adults. Hearing Review, 2011
[5] Gagliardino, J. J., Viviana Arrechea et. al. (2013). Type 2 diabetes patients educated by other patients perform at least as well as patients trained by professionals. Diabetes Metabolism Research and Reviews, 29(2) Canadian Survey on Disability 2012
[6] Bakshi A.K. (2010). Experiences in peer to peer training in diabetes mellitus: Challenges & implications. Fam Pract.,

DISCOVERY HOUSE FAMILY VIOLENCE PREVENTION SOCIETY
- **Child and Youth Program**

THEORY OF CHANGE:

Need: Alberta has the third highest rate of self-reported intimate partner violence in Canada.[1] In 2017, the Calgary Police Service received 18,528 domestic conflict calls, a six per cent increase over the five-year average.[2] Abuse in early life and risk factors such as substance abuse and mental illness affect the caregiving mothers are willing to give to or receive from their children. Trauma and abuse affect children's brain development, ability to learn, emotional, cognitive, social, and behavioural growth, and puts them at an increased risk of becoming future victims or perpetrators of domestic violence.[3]

Goal: To build protective factors in children by building resilience, improving coping skills, attachment, and family cohesion, and strengthening the capacity of mothers for positive parenting.

Strategy: The child and youth stream targets children ages 0-17. A secondary target group is vulnerable youth in community-based programs who are impacted by adverse life experiences such as parental conflict, violence, divorce, poverty and social isolation. The parenting stream is grounded in flexible, trauma-informed practices that help women foster a stimulating, safe, structured environment for their children through a holistic approach to healing. Programming for children include the Kid's Club and Healthy Relationships, and for parents, Mom's Empowerment Group and Triple P Parenting. Joint offerings include Creative Connections and Stop Now and Plan. Group are offered cyclically on site and in the community four times a year in weekly 2.5 hour sessions. Strategies include trauma-informed psycho-education, recreation, supportive counselling, components of cognitive behavioural therapy and Neurosequential Model of Therapies, play and art therapy, mental health support, and emotional regulation strategies. Moms and kids may access client-centered individual case management for one hour per week for 6 to 18 months.

Rationale: Open, nurturing relationships between children and their primary caregivers serve as buffers to toxic stress and adverse experiences.[4] Best practices emphasise positive parenting and early brain development.[5] If parents are provided with the skill set, they will create safe, engaging caregiving environments for their children to support healthy brain development and early learning experiences that build protective factors. Furthermore, child-centered approaches and engagement methods that are flexible in their delivery are key to mitigating the impact of trauma and building protective factors, improving coping skills, self-esteem and confidence, developing healthy relationships, and enhancing lifelong resilience.[6]

Indicators:
#20 – Parenting – Parent Questions
#34 – Children – Grades 4-6 – Self-Esteem, Self-Confidence, Optimism
#35 – Children – Grades 4-6 – Ability to Cope Effectively with Challenges

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[2] Chisholm, C. 2018. "EL-DIB Homicide Investigation." CPS https://www.youtube.com/watch?v=5E9jYR_nCkk&feature=youtu.be

[3] Royal Canadian Mounted Police. 2012. "The Impacts of Family Violence on Children." The Effects of Family Violence on Children: Where Does it Hurt? Ottawa: Royal Canadian Mounted Police; Child Abuse/Children Exposed to Violence Information Sheet, Human Services Alberta, October 2008. Available at: http://www.humanservices.alberta.ca/documents/PFVB0399-children-exposed-to-family-violence.pdf; and Buckle, L., B. Simpson, S. Berger, and R. Metcalfe. 2014. Prevention and Early Intervention for Domestic Violence. Calgary: Brenda J. Simpson & Associates.

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[6] Buckle, L., B. Simpson, S. Berger, and R. Metcalfe, page 47, and Cunningham, Allison, and Linda Baker. 2004. What about me!: Seeking to understand a child's view of violence in the family. London, ON: Centre for Children & Families in the Justice System. Pages 30-32.

DISTRESS CENTRE CALGARY
- **211**

THEORY OF CHANGE:

Need: At some point in their lives, every Calgarian will require access to community and social services, whether it is to meet a specific need, support a loved one, or find ways to give back to their community. Information and Referral (I&R) is "the art, science and practice of bringing people and services together. When individuals, families and communities don't know where to turn, I&R is there for them.[1]" 211 helps users to better understand their problems, navigate the complex system of services, and make informed decisions about possible solutions[2].

Goal: To deliver timely and accurate information connecting Calgarians with a full range of community, health, government, and social services.

Strategy: The foundation of 211 is the comprehensive online database of community resources that is maintained by the I&R Service[3]. Service information is thoroughly vetted through inclusion and exclusion criteria and is classified, organized and updated using professional standards of practice. 211 uses a three digit, easy to use and remember telephone number to connect callers from all backgrounds with highly trained, professional Information and Referral specialists. Service is provided 24 hours a day, seven days a week in a confidential and nonjudgmental manner, and is available in over 200 languages. The database and service is accredited by the Alliance of Information and Referral Systems (AIRS). The service delivery model includes an individual assessment of need; clarification of the situation; information or referrals; crisis intervention and advocacy, when warranted; and follow-up, as necessary. The 211 program shares data on unmet needs to inform the social service sector about emerging issues.

Rationale: The definition of I&R most commonly accepted by researchers is, "Information and Referral as the active process of linking a person with a need or problem to a service which will meet the need or solve the problem[4]." Due to the wide and often confusing array of choices, it is necessary for the user to have access to an intermediary who will clarify their problem and refer them to the appropriate agency or service provider[5]. 211's value is perhaps best described as "When callers dial 211, they talk with real people - empathic and professionally trained I& R specialists -and come away with concrete information about places to go or agencies to call in their community that might be able to help them. This combination of caring people trying to understand their personal situation and providing assistance using a standardised database makes 211 a trusted resource for callers, and is at the root of 211's effectiveness as a service agency.[6]"

Indicators:
Outputs Only

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[1] Alliance of Information and Referral Services (AIRS). 2016. AIRS Standards and Quality Indicators for Professional Information and Referral. Fairfax, VA: AIRS Page i.

[2] Alliance of Information and Referral Services (AIRS). 2016. AIRS Standards and Quality Indicators for Professional Information and Referral. Fairfax, VA: AIRS Page i.

[3] AIRS/Inform Canada. 2017. Excerpted from the Canadian edition of The AIRS/Inform Canada I&R Training Manual, a publication of the Alliance of Information and Referral Systems and InformCanada.) InformCanada. Website. www.informcanada.ca/i-r/.

[4] Croneberger, Robert, and Carolyn Luck. 1975. "Defining Information & Referral Service." Library Journal 100(19): 4. Page 1985.

[5] Ibid 1984-1987

[6] Kreuter, Matthew. 2012. "Reach, Effectiveness, and Connections: The Case for Partnering with 2-1-1." American Journal of Preventative Medicine, 43(6): S420-S421.

DISTRESS CENTRE CALGARY

- **Crisis Services**

THEORY OF CHANGE:

Need: At some point in their lives, every Calgarian will be impacted by some level of crisis, whether it is their own personal experience or through their support of a loved one. Individuals specifically at risk of suicide often face barriers to receiving timely mental health care.[1] Additionally, one of the most commonly reported unmet service needs for Albertans is accessible and low-cost counselling.[2] To address these needs, Distress Centre's crisis services provide a continuum of care that focuses on accessible, immediate access to help for anyone in crisis.

Goal: The goal of Distress Centre's crisis services is twofold: To provide an accessible, no-cost crisis service that enhances the quality of life in our community; To create a stronger community by engaging community members and developing a pool of highly trained volunteers to provide crisis support.

Strategy: Distress Centre Calgary provides a continuum of crisis services. There are no eligibility requirements and services are available to all Calgarians. Distress Centre utilizes the Roberts Seven Step Model of Crisis Intervention[3] as a conceptual framework for our crisis services. When people reach out to Distress Centre they reach a warm, empathic responder who is there to help support them without judgement. Our approach is grounded in the Samaritan's model, providing a blended response of volunteer involvement with professional staff. Distress Centre actively recruits a diverse volunteer base that includes youth, immigrants, seniors and Indigenous peoples, in order to serve a diverse city.

Rationale: The Roberts' Model provides a broad based intervention focus across diverse populations and life circumstances, with a strong collaborative principle[4]. Offering online services has been identified in research to be highly effective in engaging different demographics of the population than telephone hotlines alone, particularly the youth demographic.[5] This can be attributed in part to a phenomenon known as the online disinhibition effect, in which people find it easier to be more open about stigmatized issues such as suicide and self-injury.[6] Research indicates that trained volunteers engaging with clients and providing empathy, support, and collaborative problem solving creates beneficial outcomes[7]. Volunteers learn valuable skills that can be applied while volunteering and also elsewhere in their lives. Furthermore, volunteers will become more connected and involved with their community and make new friends and connections.

Indicators:
6 – Social Inclusion – Social Participation

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[1] Pagura, J., Fotti, S., Katiz, L. Y., & Sareen, J. (2009). Help seeking and perceived need for mental health care among individuals in Canada with suicide behaviors. *Psychiatric Services*, 60(7), pp. 943-949

[2] Wild, T Cameron, Wolfe, J., Wang, J, & Ohinmaa, A. (2014). Gap analysis of public mental health and addiction programs (GAP-MAP). Final Report. Government of Alberta. University of Alberta School of Public Health.[Online]. Available at: http://www.health.alberta.ca/documents/GAP-MAP-Report-2014.pdf

[3] Roberts, A. R. (2005). Crisis intervention handbook (3rd Ed.). New York: Oxford University press

[4] Ibid

[5] Mokkenstrom, J, et. Al. (2017). Evaluation of the 113online suicide prevention crisis chat service:Outcomes, helper behaviours and comparison to telephone hotlines. *Suicide and Life-Threatening Behaviour 47*(3), pp.282-296

[6] Suler, J. (2004). The online disinhibition effect. *Cyber Psychology & Behaviour,* 7(3), pp.321-326.

[7] Mishara, B.L., Changnon, F., Daigle, M., Balan, B., Raymond, S., Marcoux, I., Bardon, C., Campbell, J.K., Berman, A. (2007) Which Helper Behaviours and Intervention Styles are Related to Better Short-Term Outcomes in Telephone Crisis Intervention? Results from a Silent Monitoring Study of Calls to the U.S. 1-800-Suicide Network. Suicide and Life Threatening Behaviour, 37(3), June 2007. The American Association of Suicidology.

- **DIVERSECITIES COMMUNITY SERVICE ASSOCIATION**
- **CAS, Super Cool AfterSchool and World Culture Society**

THEORY OF CHANGE:

Need: Some children and youth of immigrant or diverse backgrounds in Calgary face many barriers to integration including unfamiliarity with the school system, English language proficiency, bullying, poverty related isolation, culture shock and post-traumatic stress[1]. These challenges can result in feelings of isolation, loneliness, lost sense of identity and struggles with emotional and mental health. Children and youth experiencing barriers to integration may struggle with finding their own identity in Canada, as well as undergo discrimination in their day to day life which results in affecting their mental well-being. [2]

Goal: To empower children and youth of immigrant or diverse backgrounds by supporting integration through programs that build self-confidence, self-esteem, social bonding and resiliency.

Strategy: Programs run in locations where there is a high concentration of children and youth of immigrant or diverse backgrounds either in the school or in the community.[3] Trauma-informed programs run once per week for 3 hours after school from September to December and January to June. Programs incorporate Botvin LifeSkills Training[4] with SAFE principles [5]into the curriculum. Participants are referred by school teachers. Programming for participants ages 9-12 years old addresses different themes including: social norms, social reinforcement, refusal skills, self-esteem, decision making, self-control, interpersonal skills, and coping skills. Programming for high school students cover the following topics: conflict management; anger management; body image; self-esteem; peer pressure; stress management; and coping with various forms of trauma. The youth program also strengthens participant's skills in resume writing, job searching and interviewing. Past participants have the opportunity to return as volunteer mentors. Additional social and recreational activities are organized throughout the year to facilitate integration to mainstream society and for low income families and their children to widen their social network, strength family ties as well as broaden participation.

Rationale: Research shows that participation in structured after-school programming using social emotional learning and SAFE principles supports the healthy, physical, social, and emotional development of children and youth.[6] Trauma-informed approaches to program activities has the potential to prevent structural changes in brain development caused by adverse experiences.[7] Successful integration for youth of diverse background is associated with lower levels of risky behaviour which results in positive child and youth development as well as long term impacts on Canadian society itself[8].

Indicators:
34 – Children – Grades 4-6 – Self-Esteem, Self-Confidence, Optimism
38 – Youth – Grades 7-12 – Self-Esteem, Self-Confidence, Identity

Calgary
AfterSchool

[1] Affiliation of Multicultural Societies and Service Agencies of BC (AMSS) (2016) Newcomer Youth: Challenges and Strengths Pg 2

[2] Audrey Kobayashi. (2008). Canadian Diversité- The experience of second generation Canadians. Pg 77

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[4] Botvin,G.J Griffin, K.W.,Nichols, T.R.(2006). Preventing youth violence and delinquency through a universal school-based prevention approach. Prevention Science, 7, pg. 403-408

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[6] Cooper, Merril. (2014) Positive child and youth development. FCSS Calgary Research Brief No. 1. Calgary: City of Calgary, FCSS Calgary. Pg 5.

[7] City of Calgary (2009, June). Outcome: Positive child and youth development. Pg 1

[8] Immigrant Youth: Lessons Learned from a Demonstration Project. Metropolis British Columbia. Centre of Excellence for Research on Immigration and Diversity. Pg 44.

DIVERSECITIES COMMUNITY SERVICE ASSOCIATION

- **The Bridge Program**

Revised 2019 March 20

THEORY OF CHANGE:

Need: The Chinese community is the largest visible minority group in Calgary with well over 100,000 people.[1] China continues to be one of the leading source countries for immigrants.[2] Many Chinese immigrants, even years after immigration,[3] struggle with language and cultural barriers.[4] [5] For example, 46% of people living in Chinatown do not speak either English or French.[6] Language barriers have been associated with increased risk of social exclusion[7], mental and physical health problems[8], limited help seeking behaviours[9] and are one of the chief impediments of full social and economic integration.[10]

Goal: To reduce social isolation, promote social connection, and encourage meaningful participation in Canadian society amongst Chinese immigrants with language and cultural barriers.

Strategy: The Bridge Program will provide groups for Chinese immigrants who self-identify as feeling socially isolated and have language and/or cultural barriers. Each group will run weekly for 10 weeks, have 6-12 members, have closed membership, and staff will act as facilitator. The Bridge Program will run four to six groups per year. Each group will run a blend of bonding and bridging social capital activities while weaving in opportunities for language and cultural learning. Activities will include those that build relationships within the group, connect group members to other groups both within CCCSA and the wider community and engage in events around the city. Specific activities will be different as group participants will be invited to plan how the group will unfold, but in all groups, participants will learn about Canadian culture, mainstream services and systems and how to access them and find information and resources. The groups will be held at CCCSA but will involve field trips and meeting in the community.

Rationale: Groups have been identified as a promising practice for increasing social inclusion amongst immigrant populations.[11] Groups can increase new connections amongst immigrants and facilitate supportive interactions.[12] Bonding and bridging social capital are both necessary for immigrant social inclusion[13]. Bonding increases sense of identity and informal social networks amongst immigrants while bridging connects them to mainstream society, improves access to information and resources, and increases sense of belonging to the greater society.[14]

Indicators:
4 – Positive Social Ties and/or Bonding Social Capital

1 Calgary Economic Development (2018). Demographics – Ethnic Origin. Retrieved from
https://www.calgaryeconomicdevelopment.com/research-and-reports/demographics-lp/ethnic-origin/
2 City of Calgary. (2011). Diversity in Calgary: Looking forward to 2020.
3 Xue, L. 2007. Portrait of an Immigrant Process: Difficulties Encountered and Resource Relied On for Newcomers in Their First 4 Years in Canada. Ottawa: Citizenship and Immigration.
4 Derwing, T. & Waugh, E. (2012). Language skills and the social integration of Canada's adult immigrants. Montreal, Que: Institute for Research o Public Policy.
5 Derwing, T.M., M.J. Munro, and R.I. Thomson. (2008). "A Longitudinal Study of ESL Learners' Fluency and Comprehensibility Development." Applied Linguistics 29: 359-80.
6 City of Calgary. (2016). Community profiles: Chinatown
7 FCSS. (2014). Research Brief No. 4: Positive social ties and vulnerable populations. Calgary, AB: The City of Calgary.
8 Clarke, A., & Isphording, I. E. (2017). Language barriers and immigrant health. Health Economics, 26(6), 765-778.
9 Hansson, E., Tuck, A., Lurie, S., & McKenzie, K. (2009). Improving mental health services for immigrant, refugee, ethno-cultural and racialized groups: Issues and options for service improvement. Centre for Addiction and Mental Health.
10 Xue, L. 2007. Portrait of an Immigrant Process: Difficulties Encountered and Resource Relied On for Newcomers in Their First 4 Years in Canada. Ottawa: Citizenship and Immigration.
11 FCSS. (2014). Research Brief No. 4: Positive social ties and vulnerable populations. Calgary, AB: The City of Calgary.
12 Hernandez-Plaza S, Alonso-Morillejo E, Pozo-Munoz C. 2006. "Social support interventions in migrant populations." British Journal of Social Work, 36(7), 1151–69.
13 FCSS. (2014). Research Brief No. 4: Positive social ties and vulnerable populations. Calgary, AB: The City of Calgary.
14 Pearce, P. (2008). Bridging, bonding, and trusting: The influence of social capital and trust on immigrants' sense of belonging to Canada. (Working Papers Series No.18). Halifax, Nova Scotia, Canada: The Atlantic Metropolis Centre.

FAMILIES MATTER SOCIETY OF CALGARY

- **CAS, Frontrunners**

THEORY OF CHANGE:

Need: Research shows that for at-risk children and youth, participation in youth development programming can provide protective or buffering factors that can offset multiple risk factors.[1] It is also important to assist vulnerable families or vulnerable family members through child development and after-school programs in impoverished neighbourhoods.[2] The after-school hours of 4:00 to 6:00 pm have the highest rate of youth crime and delinquent behavior in Calgary, particularly among youth who may not have adult supervision and support until their parents return from work.[3] Engagement in after-school programming also serves to mitigate this risk.

Goal: The overarching goal of this program is to increase the social competence and emotional wellbeing of at-risk children in grades 4 to 6, in order to promote a successful transition to adolescence and enhance school engagement and success. Program activities are designed to increase self-esteem and sense of self-worth, engender respect for others, develop good social skills, foster problem solving skills and promote early leadership abilities.

Strategy: Frontrunners uses SAFE strategies (sequenced, active, focused, and explicit) to ensure positive impacts on academic, social, emotional, and other developmental outcomes.[4] Program staff includes an experienced coordinator trained in child and youth development, a youth assistant, and volunteers. The program includes sports, art, music, and dance, as well as reflective activities facilitated by qualified child and youth care staff. The program is in two sessions offered twice a week for children in grades 4-6 in two Calgary schools located in neighborhoods with a high rate of vulnerable youth and families (Marlborough Park and Bowness). Frontrunners staff have been trained in and apply trauma-informed practice, and incorporated this practice into the program planning and content to further reinforce the protective factors that mitigate trauma and adverse childhood experiences in children from vulnerable families and impoverished neighborhoods.

Rationale: Effective afterschool programs bring a wide range of benefits to youth, families and communities. Afterschool programs can boost academic performance, reduce risky behaviors, promote physical health, and provide a safe, structured environment for the children of working parents.[5,6] The supportive, healthy relationships formed among peers are both immediate and long-term and research shows they enhance self-esteem, connectedness, identity and positive academic attitudes.[1]

Indicators:
#34 – Children – Grades 4-6 – Self-Esteem, Self-Confidence, Optimism

Calgary
AfterSchool

1. Cooper, Merrill. 2009. ―Programs targeting child and youth development.‖ Outcome: Positive child and youth development. FCSS Calgary Research Brief No. 1. Calgary: City of Calgary, FCSS Calgary. Pages 2-3.
2. Cooper, Merrill. 2009. ―Child and youth development.‖ Outcome: Strong Neighbourhoods. FCSS Calgary Research Brief No. 5. Calgary: City of Calgary, FCSS Calgary. Page 11.
3. The Canadian Research Institute for Law and the Family (CRILF) 2016. A Profile of Youth Offenders in Calgary - interim report.
4. Cooper, Merrill. 2009. ―Best practices in after-school programming.‖ Outcome: Positive child and youth development. FCSS Calgary Research Brief No. 1. Calgary: City of Calgary, FCSS Calgary. Page 5.
5. Eller, C.A. 1991. Building a Sense of Community. In Todd, C.M. (Ed.), *School Age Connections*, 1(1), pp. 1-2. Urbana-Champaign, IL: University of Illinois Cooperative Extension Service.
6. Little, P.M.D., C. Wimer, and H.B. Weiss. 2008. After-School Programs in the 21st Century: Their potential and what it takes to achieve it. Cambridge, MA: Harvard Family Research Project. Page 1.

FAMILIES MATTER SOCIETY OF CALGARY
- **Family Resilience Program**

THEORY OF CHANGE:

Need: Parenting is probably the most important public health issue facing our society.[1] Families who are marginalized by race, socio-economic status, or disability are much more susceptible to the damaging impact of stress on their individual and family well-being.[2] Strengthening families and supporting positive parenting are effective means of preventing the intergenerational cycle of poverty and social exclusion.[3]

Goal: To help create and sustain healthy and resilient families and build strong communities.

Strategy: The program provides weekly home-based, individualized family support and parent coaching and access to other evidence-based parenting and family life education sessions to families who are struggling with parenting, experiencing challenges with relationships and family functioning, having difficulty meeting their basic needs and/or are isolated and lacking community connections and supports. Clients served by this program include: families who attend our Family Learning & Play Centres and are identified as needing additional one-on-one assistance, families who self-refer and request individual support, and families who are referred from the community.

Individualized Support Workers complete assessments and use the evidence-based Family Star service and goal planning tool to create objectives with parents. They apply the Strengthening Families Approach to support the wellbeing and progress of families using the framework of building 5 key protective factors: parental resilience, social connections, concrete support in times of need, knowledge of parenting & child development, social & emotional competence of children. Developmental screening is completed for children under five, and developmental support plans are created if delays are identified.

Rationale: Successful parent education and support programs help parents acquire and internalize parenting and problem-solving skills necessary to build a healthy family. Research shows that effective parent training and home visitation-based family support can change parents' attitudes and behaviors, promote protective factors, mitigate intergenerational trauma and lead to positive outcomes for both parents and children[4] [5] [6]. Key protective factors include nurturing and attachment, knowledge of parenting and of child development, parenting competencies, parental resilience, social connections, concrete supports for parents, social and emotional competence of children, involvement in positive activities, and other individual skills such as self-regulation and problem solving and relational skills[7].

Research studies demonstrate that when the 5 Protective Factors embedded in the Strengthening Families Approach are well established in a family, the likelihood of child abuse and neglect diminishes. Research shows that these protective factors are also "promotive" factors in that they build family strengths and a family environment that promotes optimal child and youth development.

Indicators:
20 – Parenting – Parent Questions

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[1] Hoghughi, Masud. 1998. "The importance of parenting in child health." British Medical Journal 316(7144): 1545-1550.

[2] Vanier Institute of the Family. 2010. "Families and Stress." Families Count: Profiling Canada's Families IV. Ottawa: Vanier Institute of the Family. Page 152.

[3] Cooper, Merrill. 2014. "The issue." Positive parenting and family functioning. FCSS Calgary Research Brief 2. Calgary: City of Calgary, FCSS Calgary. Page 2.

[4] Child Welfare Information Gateway. 2013. Parent Education to Strengthen Families and Reduce the Risk of Maltreatment. 2013 - Issue Briefs

[5] Cooper, Merrill. 2009. The Issue.‖ Outcome: Positive parenting and family functioning. FCSS Calgary Research Brief No. 2. Calgary: City of Calgary, FCSS Calgary.

[6] Strengthening Families - A Protective Factors Framework. Centre for the Study of Social Policy.

[7] Child Welfare Information Gateway. 2013. Parent Education to Strengthen Families and Reduce the Risk of Maltreatment. 2013 - Issue Briefs

FAMILIES MATTER SOCIETY OF CALGARY
- **Perinatal Mental Health Program**

THEORY OF CHANGE:

Need: Up to 18% of families will experience perinatal mental health issues, the most prominent of which is postpartum depression (PPD), affecting over 1 out of 10 mothers and fathers in North America[1],[2]- and also includes anxiety, panic disorder, and OCD. Despite being primarily pre-natal to 24 months post-birth, without specialized support, perinatal mental health issues can have a long-lasting negative impacts including the breakdown of parental relationships, isolation, poor attachment and child development outcomes, on-going mental health challenges, and - at its extreme - psychosis, suicide and infanticide[3] [4].

Goal: Provide specialized, evidence-based services for families experiencing perinatal mental health issues, including: helping parents resolve them, mitigating negative impacts on children, reducing family isolation, building natural supports and family resiliency, and improving parental coping.

Strategy: The Perinatal Mental Health Program includes best practice and emerging new practice components: PPD Screening; psycho-educational support groups for mothers experiencing PPD and for prenatal women at high risk for PPD; info sessions for fathers; individualized family support offered in-home and at Family Centres; a yoga-based Anxiety & Breathwork course; a collaborative advisory relationship with a Psychiatrist specialized in perinatal mental health; specialized support for fathers /partners experiencing perinatal mental health issues; culturally sensitive programming that is responsive to the unique needs of Indigenous families and new Canadians; developmental screening for children in the family under six; and access to Peer Volunteer phone support as part of the final stage of the program.

Rationale: Women who received a targeted psychosocial intervention are more likely to prevent, reduce the severity of and resolve their postpartum depression, compared with those receiving standard care. Best practice interventions include: individualized support provided by specialized staff; peer-based telephone support; and group psycho-educational support. Identifying mothers 'at-risk' in the prenatal period can prevent/reduce the severity of PPD.[5] Both the cost and long-term impact of perinatal mental health issues can be mitigated by effective and timely health promotion, risk prevention and support strategies including screening, pre- and post-natal services, parenting and family support, screening and promotion of early childhood development, and increased public awareness - delivered in an integrated way[6].Emerging research shows that fathers also need perinatal mental health support, both as partners and for their own experience of mental health issues in the perinatal period[7]. Best practice must include a holistic approach, including positive father involvement, to ensure better outcomes[8].

Indicators:
4 – Positive Social Ties and/or Bonding Social Capital
19 – Family Cohesion – Parent / Adult Questions

[1] O'Hara, M.W. & Swain, A.M. Rates and Risk of Postpartum Depression - a meta-analysis. 1996. Department of Psychology, University of Iowa

[2] Paulson, J.F. & Bazemore, S.D. 2010 Prenatal and postpartum depression in fathers and its association with maternal depression: a meta-analysis. JAMA 2010, May 19; Issue 303, volume 19, p: 1961-1969.

[3] Beck, C.T. A Meta-Analysis of Predictors of Postpartum Depression. 1996. Nursing Research: September-October 1996, Volume 45, Issue 5, p 297-303.

[4] Beck, C.T. The effects of postpartum depression on maternal-infant interaction: a meta-analysis. 1995. Nursing Research: September-October 1995 - Volume 44 - Issue 5 - p 298-304.

[5] Dennis, C.L. Psychosocial and psychological interventions for postpartum depression. 2013.

[6] Creating Connections: Alberta's Addiction and Mental Health Strategies. 2011. Government of Alberta Publications.

[7] Paulson, J.F. & Bazemore, S.D. 2010 Prenatal and postpartum depression in fathers and its association with maternal depression: a meta-analysis. JAMA 2010, May 19; Issue 303, volume 19, p: 1961-1969.

[8] Dozois, E., Wells, L., et al. No Man Left Behind - How and why to include fathers in government-funded parenting strategies. University of Calgary

FAMILIES MATTER SOCIETY OF CALGARY

- **Successful Young Parents**

THEORY OF CHANGE:

Need: Families headed by parents aged 16 to 22 are more likely to endure a cycle of inter-generational poverty, and are at greater risk of social isolation and of being unable to parent their children using a positive approach. They are not fully mature themselves and are typically undereducated, underemployed, lack natural support, and experience housing instability, factors that contribute to poor parenting.[1] Research shows that fathers are often explicitly or implicitly marginalized in parenting programs despite playing an important and distinct role in supporting child development and financial and functional stability of the family.[2,3]

Goal: To affirm the strengths of young parents and help them to learn and practise parenting strategies to enable them to provide tools to guide their children's development, and gain knowledge and confidence in their ability to handle stressful family situations.

Strategy: Targeted staged programming for young parents is provided to develop reflective practices, enhance self-awareness, resilience, and promote change. At each of four program stages, participants are reassessed and further needs may be identified. Participants receive individualized support to support progress on their self-identified goals. Staff use coaching and teaching strategies to help parents learn about child development. Parents also learn about community resources and how to access them. In family life education sessions, the focus is on improving knowledge of child development, play based learning, language and early literacy development, healthy attachment, and child health. The curriculum includes communication skills, healthy relationships, resilience, and positive parenting.

Rationale: All delivery methods and curricula draw on best practices research such as the Strengthening Families approach, Gottman couple support strategies and Kumpfer's parenting effectiveness program.[4] The program uses qualified staff with theoretical grounding and practical experience, targets a clearly defined group of people with common needs, and lasts from the prenatal period into the child's second year.[5] Using a combination of individualized support, case management, and peer group meetings improves parenting and risk of child maltreatment.[6] There is a large body of evidence indicating that community-based parent support programs operated in a family-centered manner increase parents' sense of parenting confidence and competence.[7] Current research also strongly supports the need for parenting programs to fully include fathers to achieve the best outcomes.[2,3]

Indicators:
19 – Family Cohesion – Parent / Adult Questions
20 – Parenting – Parent Questions

[1] Lipman, E.L., M.H. Boyle, M.D. Dooley, and D.R. Offord. 2002. "Child well-being in single mother families." Journal of the American Academy of Child and Adolescent Psychiatry 41(1): 75-82.
2. Dozois, S., Wells, L., Exner-Cortens, D, and Esina, E. 2016. No Man Left Behind - How and Why to Include Fathers in Government-Funded Parenting Strategies.
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6. Cooper, Merrill. 2009. —Parenting programs.‖ Outcome: Positive Parenting and Family Functioning. FCSS Research Brief #2. Calgary: City of Calgary, FCSS Calgary. Page 22.
7. Cooper, Merrill. 2009. —Parenting programs.‖ Outcome: Positive Parenting and Family Functioning. FCSS Research Brief #2. Calgary: City of Calgary, FCSS Calgary. Page 20.

FURTHER EDUCATION SOCIETY OF ALBERTA, THE
- **Calgary Community Family Literacy Program**

THEORY OF CHANGE:

Need: 44.8% of Alberta's adults read below Level 3[1]. Level 3 is widely considered a baseline level for functioning well in all environments - work, education, personal life and society. Limited literacy skills are disproportionately higher among marginalized populations - new immigrants/refugees, Indigenous persons, unemployed or under-employed, and those with less than a high school education. Inadequate literacy skills have profound consequences for both parents and their children. Children of low-literate parents are exposed to 30,000,000 fewer words and enter kindergarten with a much larger skills gap than their peers[2]. This gap never fully narrows, and as a result, almost 40% of Canadian youth do not have suitable literacy skills[3]. Family literacy strengthens relationships within the family, builds a strong foundation for kids at home, and promotes life-long learning.

Goal: To build stronger family foundations and to break the cycles of low-literacy and poverty in families facing barriers such as lack of educational or English skills, cultural obstacles, unemployment, or family violence, through the delivery of barrier-free family literacy and foundational learning programs.

Strategy: Non-formal family literacy and foundational learning programs are delivered in partnership with community agencies. Programs can be as many hours, days, or weeks as requested by the learners and/or the partner organization, but typically run two and a half hours per session for ten weeks; with agencies usually running programs in Spring, Summer, Fall, and Winter terms. All programs aim to promote family literacy and essential skill development for learners. As low-literate participants cover topics related to parenting, they practice reading, writing, language development, and new parenting skills. They receive information about other programs and resources so they can connect to community and meet long-term learning goals. In response to COVID-19, a mixed model of delivery will rely less on face-to-face traditional learning methods, and more on alternative methods, such as online learning. These include platforms such as: Zoom, Microsoft teams, WhatsApp, and Messenger.

Rationale: The 'positive parenting and family functioning' research brief[4] asserts communication, routine, and positive parenting as key factors for reducing dysfunction in families. CCFLP follows best practice by targeting entire families (rather than solely children or parents) and includes parent skills training, children's social skills, and parent/child activities to improve family relationships. The 'positive social ties for vulnerable populations' research brief[5] states that diverse and healthy social networks reduce the risk of social isolation. CCFLP help participants connect with community resources and supports that will build their social capital and increase participation in community.

Indicators:
6 – Social Inclusion – Social Participation
20 – Parenting – Parent Questions

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[1] Government of Canada, Statistics Canada, Skills in Canada: First Results from the Programme for the International Assessment of Adult Competencies (PIAAC), Catalogue no. 9-555-X2013001 (Ottawa, ON: Statistics Canada, October 8, 2013). https://www150.statcan.gc.ca/n1/en/catalogue/89-555-X2013001

[2] Kevin Morgan, Peter Waite, and Michele Diecuch, The Case for Investment in Adult Basic Education (Syracuse, NY: ProLiteracy, March, 2017). https://www.proliteracy.org/Portals/0/Reder%20Research.pdf?ver=2017-03-24-151533-647

[3] TD Bank Financial Group, Literacy Matters: A Call for Action (Toronto, ON: TD Bank Financial Group, 2007). https://www.brantskillscentre.org/wp-content/uploads/2012/05/Literacy-Matters-TD.pdf

[4] Family & Community Support Services. (2020). Research brief 2: Positive parenting and family functioning [PDF file]. https://www.calgary.ca/csps/cns/fcss/fcss-research-briefs.html

[5] Family & Community Support Services. (2020). Research brief 4: Positive ties for vulnerable populations [PDF file]. https://www.calgary.ca/csps/cns/fcss/fcss-research-briefs.html

GOOD COMPANIONS 50 PLUS CLUB

- **Seniors Programs**

THEORY OF CHANGE:

Need: In 2017, 11 per cent of Calgary's population was aged 65 or older, with a 23 per cent population increase projected to occur by 2022. The population aged 75 or older is expected to grow by 14 per cent during the same period. Risk factors associated with social isolation among seniors include age over 75, low income, living alone, health or mobility difficulties, and language or cultural barriers. Currently, 26 per cent of Calgary seniors live alone and almost 40 per cent of unattached Calgary seniors live in poverty.[1]

Goal: To promote social connections and reduce social isolation among seniors by providing programs and services that are accessible, affordable, and account for health, mobility and cultural considerations. Seniors programs are intended to promote and enable physical, mental, and social engagement within the community.

Strategy: Social connectedness is associated with better physical and mental health, quality of life, and longer life.[2] Seniors centres across the city offer social, educational, recreational, and leisure programs and activities for seniors aged 65 and older. Programs are coordinated by trained staff and, where possible, are designed with local seniors to respond to preferences for social and community engagement and supports; provide physical activity and recreation for seniors of diverse interests and abilities; and create an inviting and inclusive space for connecting to important community supports for seniors. Programming is ongoing and flexible to respond to needs and interests as they are identified. Centres are open year-round on weekdays, as well as some Saturdays and some evenings to host monthly or bi-weekly socials or special events.

Rationale: Social isolation in the seniors' population can be prevented and reduced by enhancing protective factors such as social ties (including with younger friends and neighbours), good health, creative expression, and communication skills. Community engagement can be facilitated with accessible services, access to transportation, and opportunities to take up meaningful roles in society.[3] Programs that capitalize on seniors' experiential knowledge and affirm and enable opportunities for reciprocity, feeling valued, and making meaningful contributions contain the psychological preconditions for building social ties. Best practices include group programs with an educational or training component, intergenerational programs, gatekeeper programs, volunteer opportunities and targeted social or support activities, which can be tailored to participant health and activity limitations.[4] Programs should be facilitated by quality trained staff and enable participant involvement in program design, implementation, and review.[5]

Indicators:
4 – Positive Social Ties and/or Bonding Social Capital
6 – Social Inclusion – Social Participation

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[1] The City of Calgary, Calgary & Region Economic Outlook, Spring, 2018.
[2] Austin, C., R. McClelland, J. Sieppert, and E. Perrault. n.d. The Elder Friendly Communities Project: Understanding Community Development and Service Coordination to Enhance Seniors' Quality of Life. Calgary: University of Calgary, Faculty of Social Work. Page 20.
[3] Edwards, P. and A. Mawani. 2006. Healthy Aging in Canada: A New Vision, A Vital Investment From Evidence to Action. Ottawa: Federal/Provincial/Territorial Committee of Officials (Seniors), Healthy Aging and Wellness Working Group. Pages 17-18.
[4] Cooper, Merrill. 2009. "Vulnerable Seniors." Outcome: Positive Social Ties and Vulnerable Populations. FCSS Calgary Research Brief No. 4. Calgary: City of Calgary, FCSS Calgary. Pages 12-15.
[5] Cattan, M., M. White, J. Bond, and A. Learmouth. 2005. "Preventing Social Isolation and Loneliness among Older People: A Systematic Review of Health Promotion Interventions." Ageing and Society 25: 41-67. Pages 57, 61.

GREATER FOREST LAWN 55+ SOCIETY

- **Seniors Programs**

THEORY OF CHANGE:

Need: In 2017, 11 per cent of Calgary's population was aged 65 or older, with a 23 per cent population increase projected to occur by 2022. The population aged 75 or older is expected to grow by 14 per cent during the same period. Risk factors associated with social isolation among seniors include age over 75, low income, living alone, health or mobility difficulties, and language or cultural barriers. Currently, 26 per cent of Calgary seniors live alone and almost 40 per cent of unattached Calgary seniors live in poverty.[1]

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Strategy: Social connectedness is associated with better physical and mental health, quality of life, and longer life.[2] Seniors centres across the city offer social, educational, recreational, and leisure programs and activities for seniors aged 65 and older. Programs are coordinated by trained staff and, where possible, are designed with local seniors to respond to preferences for social and community engagement and supports; provide physical activity and recreation for seniors of diverse interests and abilities; and create an inviting and inclusive space for connecting to important community supports for seniors. Programming is ongoing and flexible to respond to needs and interests as they are identified. Centres are open year-round on weekdays, as well as some Saturdays and some evenings to host monthly or bi-weekly socials or special events.

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Indicators:
4 – Positive Social Ties and/or Bonding Social Capital
6 – Social Inclusion – Social Participation

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[1] The City of Calgary, Calgary & Region Economic Outlook, Spring, 2018.
[2] Austin, C., R. McClelland, J. Sieppert, and E. Perrault. n.d. The Elder Friendly Communities Project: Understanding Community Development and Service Coordination to Enhance Seniors' Quality of Life. Calgary: University of Calgary, Faculty of Social Work. Page 20.
[3] Edwards, P. and A. Mawani. 2006. Healthy Aging in Canada: A New Vision, A Vital Investment From Evidence to Action. Ottawa: Federal/Provincial/Territorial Committee of Officials (Seniors), Healthy Aging and Wellness Working Group. Pages 17-18.
[4] Cooper, Merrill. 2009. "Vulnerable Seniors." Outcome: Positive Social Ties and Vulnerable Populations. FCSS Calgary Research Brief No. 4. Calgary: City of Calgary, FCSS Calgary. Pages 12-15.
[5] Cattan, M., M. White, J. Bond, and A. Learmouth. 2005. "Preventing Social Isolation and Loneliness among Older People: A Systematic Review of Health Promotion Interventions." Ageing and Society 25: 41-67. Pages 57, 61.

HILLHURST−SUNNYSIDE COMMUNITY ASSOCIATION
- **Community Connections**

THEORY OF CHANGE:

Need: Research demonstrates that seniors, immigrants, and people living on low-income are at risk of lacking positive social ties. Individuals who are socially isolated are at high risk of health problems and poverty. Seniors who live alone are particularly vulnerable to social exclusion.[1] According to 2011 census data, our community is home to 235 seniors living alone.[2] Recent community profiles indicate that 15 per cent of Hillhurst's population and 13 per cent of Sunnyside's population are low-income.[3]

Goal: To increase positive social ties, develop networks of support, and create engagement opportunities for community members who are at risk of social isolation.

Strategy: Community Connections draws on promising practices from peer-support models and asset-based community development to increase social ties and support vulnerable community members. Community Connections recognizes the differing needs of at-risk community members by using three approaches to prevent and/or decrease social isolation. First, vulnerable residents, primarily isolated seniors, are paired with neighbourhood-based connectors who provide regular one-on-one support to meet the needs of the individual. Community connectors undergo training to enhance their skills and ability to make meaningful and helpful interactions with the individuals they support. Second, participant-driven, weekly group peer support programming provides opportunities to build social supports and livelihood assets for a minimum of 40 weeks of the year. Finally, vulnerable residents will have opportunities to share their talents, build their skills and increase social ties through volunteer opportunities to support their peers. By recognizing the social assets within our community and facilitating connections, vulnerable residents will be better supported, better able to meet their needs and create stronger social ties. Participants complete a pre-test at program registration and complete a post-test every three months until their relationship with the agency ends.

Rationale: Calgary's Enough for All Strategy identifies building strong personal networks as an important strategy for preventing poverty.[4] Research further supports that the risks of social isolation can be prevented or reduced by increasing positive social ties, developing a sense of community belonging and cooperation among neighbours, and addressing needed elements of support.[5] Peer support in both individual and group formats has been associated with expanded social networks[6], and strong peer-to-peer social ties give participants social incentives to support goal-directed activities and the social leverage to move beyond their past experiences.[7]

Indicators:
4 – Positive Social Ties and/or Bonding Social Capital
7 – Social Inclusion – Participation in Neighbourhood

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[1] Cooper, Merrill. 2014. "The issue." Positive social ties and vulnerable populations. FCSS Calgary Research Brief 4. Calgary: City of Calgary, FCSS Calgary. Pages 1 and 2.
[2] City of Calgary Community Profiles for Sunnyside and Hillhurst http://www.calgary.ca/CSPS/CNS/Pages/Research-and-strategy/Community-profiles/Community-Profiles.aspx
[3] City of Calgary. 2015. "Income." Hillhurst. and "Income." Sunnyside. The City of Calgary Community Profiles: Part B – Community Character. Calgary: City of Calgary, Community & Neighbourhood Services, Research & Strategy. Page 13.
[4] Secretariat of the Calgary Poverty Reduction Initiative. 2013. Enough for All: Unleashing Our Communities' Resources to Drive Down Poverty in Calgary. Calgary: The Calgary Poverty Reduction Initiative. Page 4.
[5] Cooper, Merrill. 2013. Strong neighbourhoods. FCSS Calgary Research Brief 5. Calgary: City of Calgary, FCSS Calgary. Pages 1, 3, 7 and 11.
[6] Cooper, Merrill. 2014. "Peer Support Groups." Positive social ties and vulnerable populations." FCSS Calgary Research Brief 4. Calgary: City of Calgary, FCSS Calgary. Page 1.
[7] Bancroft, W. 2004. Sustaining: Making the Transition from Welfare to Work. The Self-Sufficiency Project. Ottawa: Social Research and Demonstration Corporation. Pages 25-27.

HIV COMMUNITY LINK SOCIETY

- **Strong Voices STBBI Prevention Program**

THEORY OF CHANGE:

Need: Indigenous people continue to be significantly over-represented in the local sexually transmitted and blood borne infection (STBBI) epidemic. In 2020, Indigenous people accounted for 25% of all newly reported HIV cases in Alberta; a 5% increase from 2017[1]. With an incidence rate of HIV across all ethnicities in the Calgary Health Zone in 2020 at 3.98, Calgary has the third highest rate across the province and is only slightly lower than the provincial rate of 4.36[1]. Hepatitis C (HCV) rates amongst Indigenous people are comparatively high, with an incidence rate in the Calgary Health Zone of 23.56 in 2019[1]. The key social determinants of STBBI vulnerability include substance use, mental health issues, poverty, interpersonal violence, and lack of social supports, all of which are impacts of intergenerational trauma. [2][3]

Goal: To ensure Indigenous individuals at risk for and affected by HIV, HCV and other STBBI's have access to a continuum of holistic and culturally relevant healing practices, which move individuals and communities along a path of well-being, enhancing resiliency, and reducing infectious disease vulnerability.

Strategy: Up to thirty clients at risk of or affected by HIV, HCV or other STBBI's will be engaged each year in a continuum of services focused on addressing intergenerational trauma, which presents as negative determinants of health. All activities incorporate traditional worldviews and practices. Long-term, outreach-based case management and support services are offered for an average of 6 to 18 months. The focus is on meeting individual client needs in order to build support and belonging, while reducing risk and vulnerability. Access to Elders is facilitated to enhance outreach, support outcomes, and strengthen protective factors, and elders are available to meet with clients on a one to one basis or through traditional ceremony. Clients are also supported to re-engage with culture and ceremony at an individual level via knowledge keeping, provision of smudging supplies, and emotional support.

Rationale: The needs of Indigenous Calgarians at risk and affected by STBBI's such as HIV are best addressed through interdependent healing processes originating within the affected community.[4][5] When the Indigenous STBBI epidemic is understood as a symptom of colonization and intergenerational trauma, promising healing practices to build well-being and enhance belonging serve as the foundation of preventive risk reduction and health promotion strategies.[6][7][8][9] Indigenous identity can be facilitated through activities including traditional ceremonial and cultural gatherings[10].

Indicators:
50 – Sense of Cultural Belonging and Feeling Supported
54 - Traditional Healing Practices for Individuals

[1] Alberta Health, Interactive Health Data Application. Retrieved September 27, 2021, from http://www.ahw.gov.ab.ca/IHDA_Retrieval/

[2] Public Health Agency of Canada. 2014. HIV/AIDS Epi Updates Chapter 8: HIV/AIDS among Aboriginal People in Canada. Ottawa: Public Health Agency of Canada. Pages 22-42

[3] Canadian Council on Social Determinants of Health. 2013. Roots of Resilience: Overcoming Inequities in Aboriginal Communities – Final Report.

[4] Barker, C., and A. Dion. 2012. "Trauma and First Nations Peoples." Legacy Education: Knowledge to Support Families. A Symposium on Understanding Impacts of Residential Schools on Families, Addictions and Violence. Upstart and FCSS. Calgary, Alberta. Slide 27. Quoted in Pinnow, Joanne. Agency Theories of Change and Outcome Indicators, 2020 ISC: Unrestricted Page 1 of 146 2014. "Socio-psychological impacts of intergenerational trauma and trauma responses." Aboriginal brief. FCSS Calgary Research Brief 6. Calgary: City of Calgary, FCSS Calgary. Page 10.

[5] Allan, B. and Smylie, J. 2015. First Peoples, second class treatment: The role of racism in the health and well-being of Indigenous peoples in Canada. Toronto, ON: the Wellesley Institute. Pages 31-34.

[6] Hunter, Boyd. 2009. "Indigenous social exclusion: Insights and challenges for the concept of social Inclusion." Family Matters 82: 52-61.

[7] National Collaborating Centre for Aboriginal Health. 2016. Culture and Language as Social Determinants of First Nations, Inuit and Metis Health. Prince George, BC: National Collaborating Centre for Aboriginal Health. Pages 2-7.

[8] Native Mental Health Association of Canada. 2010. Building Bridges 2: A Pathway to Cultural Safety, Relational Practice and Social Inclusion – Final Report. Guelph, ON: Mood Disorders Society of Canada. Pages15-16.

[9] Fast, E. Collin-Vezina, D. (2010). Historical Trauma, Race-based Trauma and Resilience of Indigenous Peoples: A literature review. First Peoples Child & Family Review 5(1): 126-136.

[10] Goodwill, A.O., and R. McCormick. 2012. "Giibinenimidizomin: Owning Ourselves – Critical Incidents in the Attainment of Aboriginal Identity." Canadian Journal of Counselling and Psychotherapy 46(1): 21-34.

HOSPICE CALGARY SOCIETY
- **The Children's Grief Centre**

THEORY OF CHANGE:

Need: Calgary's population includes 298,000 children and teens[1], of which an estimated 12,000 are bereaved following the death of a parent or primary caregiver . These children and teens are at risk for depression, anxiety, post-traumatic stress, and lower academic success[23]. Many are living in lone-parent households and impacted by economic challenges.

Goal: To build resiliency in children/youth, promote emotional well-being, foster positive social ties, and reduce risky lifestyle behaviors through early interventions.

Strategy: This program offers Intensive Individual/Family Counselling Monday to Friday, during the daytime and early evening at the Children's Grief Centre, in the client's home, school or another location. Counsellors are certified and registered mental health professionals. While most clients access fewer than 10-15 sessions, long-term support is provided as needed. This program also offers Psycho-Educational Bereavement Groups. Kids' Club is an 8-week closed group for children grades 1 to 6 and their parent/guardian and Common Ground is an 8-week group for bereaved teens. The groups, led by professionals and trained volunteers, seek to normalize grief through connecting with peers, increase knowledge of grief, exploring healthy coping mechanisms, offering opportunities to talk about the deceased, and facilitating the expression of feelings and thoughts. The Village is a monthly drop-in group for families to connect peer-to-peer.

Rationale: Children, teens and parents who are not supported in their grief can develop emotional and mental health problems leading to social isolation and high-risk behaviours[4]. A child's adjustment to death is heavily influenced by stress after the death linked to family distress, parent-child relationships, and the child's protective resources. Early stressful and nurturing environments have strong effects on the developing brain with negative influences being linked to a larger amygdala and smaller prefrontal cortex[5], which is linked to well-being and positive connections to others[6] . Interventions that decrease the child/family's exposure to stress, increase exposure to positive experiences, and increase the family's ability to deal with stressors, will build resiliency[7]. A program model of group and counselling that is individually responsive, flexible, collaborative and focuses on individuals and families helps clients better understanding their grief and explore healthy coping mechanisms. This leads to outcomes, including reduced problematic grief and improved ability to manage future difficult situations[8].

Indicators:
29 – Youth - Grades 7-12 – Adult Confidant
38 – Youth – Grades 7-12 – Self-Esteem, Self-Confidence, Identity

[1] 2016 Civic Census Results. (n.d.). Retrieved October 07, 2016, from http://www.calgary.ca/CA/city-clerks/Documents/Election-and-information-services/Census2016/2016-Census-Results-City-Wide-Tables.pdf

[2] Sandler, I.N., Ma, Y., Tein, J.Y., Ayers, T.S., Wolchik, S., Kennedy, C. & Millsap, R. (2010). Long-term effects of the family bereavement program on multiple indicators of grief in parentally bereaved children and adolescents. Journal of Consulting and Clinical Psychology, 78(2), 131-143.

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[4] Stroebe, M., Schut, H, and Stroebe, W. (2007). Health outcomes of bereavement. Lancet, 370, 1960-73. (5)

[5] Davidson, R. & McEwen, B.S. (2012). Social influences on neuroplasticity: stress and interventions to promote well-being. Nature Neuroscience, 15(5), 689-695.

[6] Siegel, D. The latest neuroscience applied: from neuroplasticity to neural integration (online course) from The Mindsight Institute. Retrieved September 08 2016, from www.mindsightinstitute.com.

[7] Hansen, D.M., Sheehan, D.K., Stephenson, P.S., & Mayo, M.M. (2015). Parental relationships beyond the grave: adolescents' descriptions of continued bonds. Palliative and Supportive Care, 1-6.

[8] Bugge, K.E., Darbyshire, P., Rokholt, E.G., Haugstvedt, T.S., & Helseth, S. (2014). Young children's grief: parents' understanding and coping. Death studies, 38, 36-43

HULL SERVICES

- **Braiding the Sweetgrass**

THEORY OF CHANGE:

Need: Historic processes have separated Indigenous people from their culture, which has led to community, family and individual suffering. Symptoms of this experience may include addictions and mental health issues; educational, social and economic disadvantage; homelessness; family and community violence; and incarceration.[1] In Alberta, reported ratings of Indigenous well-being are far lower than the general population: Indigenous children make up 69% of children in the welfare system[2]; suicide rates are 6 times higher among Indigenous youth.

Goal: To build a foundation for Indigenous families that is healthy and free from the trauma cycle.

Strategy: Change strategies include traditional cultural activities like Sweat Lodge, the Pipe, Elder guidance, and smudging applied with a Western, trauma-informed lens of the Neurosequential Model of Therapeutics© (NMT). NMT concepts include: the impact of trauma on the brain, positive brain development embedded in cultural practices, and positive coping strategies[3]. Two cohorts of 8-10 families run from March-June and from September-December, participating 10 hours per month. Parents participant in individual (via home visits) and group discussions, and activities that promote reflection on the impact intergenerational trauma has on parenting capacity, self-regulation, identity, and connections in the Indigenous community. Children/youth participate in culturally-based activities that: facilitate building trusting relationships (e.g. sharing circles); involve repetitive patterned activities (e.g. program rituals, drumming, breath work) that foster greater regulation; and provide opportunities for connection to their cultures (e.g. Elder teachings). After the program, families can participate in a Continuing Community component with access to cultural teachings, Elders and past participants.

Rationale: Multi-dimensional treatment[4] that embraces an understanding of community, family, and personal histories and responds to current feelings, thoughts, and patterns of behavior is recommended for addressing intergenerational trauma. Research supports the Aboriginal Healing Foundation's multi-dimensional approach[5] of: (1) introducing or reintroducing culture, (2) recognizing, accepting and reclaiming history as a way to understand the impact of trauma; (3) understanding brain development and the stress response and strategies for resilience and coping[6], and (4) creating opportunities for people to experience a sense of belonging to community.

Indicators:
49 – Historical Indigenous Knowledge
50 – Sense of Cultural Belonging and Feeling Supported
52 – Understanding Traditional and Community-Based Parenting Practices

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[1] Bombay, A., Matheson, K., and H. Anisman. 2013. The intergenerational effects of Indian Residential Schools: Implications for the concept of historical trauma. Transcultural Psychiatry 1363461513503380, first published on September 24, 2013 doi: 10.1177/1363461513503380.

[2] Office of the Child and Youth Advocate Alberta. 2016. Voices for change. Aboriginal Child Welfare in Alberta: A special report. Edmonton AB: Author.

[3] Perry, B. 2009. Examining Child Maltreatment Through a Neurodevelopmental Lens: Clinical Applications of the Neurosequential Model of Therapeutics. Journal of Loss and Trauma, 14: 240-255

[4] Archibald, L. 2006. Framework for Understanding Trauma and Healing: Cultural Interventions. Final Report of the Aboriginal Healing Foundation, Volume III: Promising Healing Practices in Aboriginal Communities. Ottawa: Aboriginal Healing Foundation. Pages 15-68.

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HULL SERVICES
- **Mentors Matter**

THEORY OF CHANGE:

Need: Many of the young people served by Hull Services have experienced trauma and have a limited number of natural healthy adult relationships. Research has shown that childhood trauma has long lasting implications on mental health and quality of life[1]. Many of the families Hull serves are low income, have limited community connections and social ties suggesting that vulnerable children and youth are less able to access support services and to participate in their community.[2]

Goal: To enhance the well being and social inclusion of vulnerable young people through professionally facilitated mentoring relationships with volunteer adult mentors.

Strategy: Volunteer Mentors are adults who are positive role models, enjoy spending time with young people, and share their interests and experiences with them. Mentees are young people who are currently receiving services through Hull. Mentors provide support and guidance to young people ages 5 – 24. Mentors receive a minimum of 13 hours of training, and regular supervision and support from Mentors Matter staff throughout the duration of the mentoring relationship. Post match training is also offered through Mentors Matter and Hull Services Training Department to further the Mentor's skills. Mentors are matched with young people for one-to-one mentoring that takes place in the community about once per week for at least one year. It is intended that the mentor - mentee match be sustained as long as possible; particularly through life transitions. Mentors engage their mentees in activities in the community that promote health and social connectedness. Group mentoring occurs in Hull's campus based programs where the young people engage with a mentor. Ongoing matching occurs, with post testing done every six months.

Rationale: Mentoring is a proven practice for enhancing positive child and youth development. Research has shown that mentoring programs are most effective when participating youth had a higher risk background (e.g. experienced abuse and/or neglect), and/or a higher environmental risk background (e.g. living in a high crime neighbourhood), and where the program included teaching and training for mentors, as well as child advocacy.[3] Mentor/mentee relationships provide young people with a positive role model and an adult confidant. Through the program's use of the Neurosequential Model (NM), a trauma informed framework, a child's developmental needs are addressed by the "Therapeutic Web" of supports (including mentors). Research has shown that relationship is the most important ingredient in the therapeutic/healing process. Positive relationships with caring adults can enhance self-esteem, resilience, social competence, physical well-being, academic achievement, appropriate behaviours and a sense of belonging[1]. Mentor relationships can also reduce substance abuse, and violence recidivism.[4]

Indicators:
29 - Youth - Grades 7-12 - Adult Confidant
38 - Youth - Grades 7-12 - Self-Esteem, Self-Confidence, Identity

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[1] Ludy – Dobson, C.L. & Perry B.D. 2010. The role of healthy relational interactions in the role of buffering the impact of childhood trauma. In Gil, E. (Ed.), Working with children to heal the Interpersonal Trauma: The Power of Play New York. NY: The Guilford Press. P.26-43.
[2] Cooper, Merrill. 2013. Positive social ties and vulnerable populations. (Calgary, AB: Family & Community Support Services, The City of Calgary). Page 5.
[3] Cooper, Merrill. 2013. Positive child and youth development. (Calgary, AB: Family & Community Support Services, The City of Calgary). Page 4.
[4] Snipe, C.L. 2002. "Mentoring Programs for Adolescents: A Research Synthesis." Journal of Adolescent Health 31(6): 252.

HULL SERVICES

- **Patch**

THEORY OF CHANGE: Revised 2019 November 21

Need: In Calgary: 1 in 10 live in poverty, 1 in 5 worry about not having food[1] and 4 in 10 risk being in poverty should they miss a pay cheque[2]. People living in poverty manage multiple and complex challenges[3]: they can be socially isolated, "harder to employ" or "precariously employed," they face chronic economic strain and barriers to accessing basic needs, language/cultural barriers, have unstable environments, and numerous parenting stressors –factors that threaten healthy family functioning[4]

Goal: Individuals and families experiencing poverty will increase their financial stability, employment and education opportunities, social inclusion and healthy connections, positive parenting behaviours and their overall sense of wellbeing.

Strategy: Patch delivers six wrap-around services (7 days a week) at neighbourhood hubs and in the community. People served prioritize their own needs. Services include system navigation support, target the multi-dimensional nature of poverty and can include a wide range of partnerships. 1) Basic Needs: Relationship building to promote longer term change; in-the-moment emergency food and referrals, and support with eviction or utility arrears. 2) Employment & Education:life skills or pre-employment training, career exploration, resume development, job search strategies, interview preparation and post-employment support. 3) Social Inclusion: Embedded in all service areas (building on natural supports and connecting isolated people to their community via small and/or large gatherings and groups). 4) Child & Family Wellbeing: influenced by SEL competencies for children 8-11, one group (8 weeks) at each hub, a monthly drop-in developmental play group and/or parenting education/training (developmental support plans, Nurturing Parenting) 1 hr. each week -12 wks or in-home). 5) Financial Empowerment: Increase financial literacy; financial coaching and budgeting, tax returns (individual and/or tax clincs) and accessing government benefits. 6) Crisis Support and Personal Capacity Building: crisis support in concert with coping skills, safety plans and supports to enhance resiliency skills (SPR).

Rationale: One of the most efficient strategies for poverty-reduction services is through community-based initiatives such as community or neighbourhood hubs[5]. Having stable and secure employment is an important component of a wider anti-poverty agenda that includes policy change, social inclusion and other important financial interventions.[6] Initiatives that work towards social inclusion and healthy relationships can cushion the impact of poverty; improve parenting skills, family function, personal well-being and developmental outcomes for children."[7]

Indicators:
7 – Participation in Neighbourhood
14 – Individual/Family Poverty – Perceptions

[1] Enough for All. (2017). Learn the facts about poverty in Calgary. Retrieved from http://enoughforall.ca/learn/
[2] Enough for All 2.0. (2019). Leveraging our communities' Leadership to Tackle poverty in Calgary: Refreshed poverty reduction strategy for 2019-2023.
[3] Cooper, Merrill. 2014. "Educational upgrading." Individual and family economic self-sufficiency. FCSS Calgary Research Brief 3. Calgary: City of Calgary, FCSS Calgary.
[4] Cooper Merrill. 2014. "Chronic low income." Positive parenting and family functioning. FCSS Calgary Research Brief 2 & 4. Calgary: City of Calgary, FCSS Calgary.
[5] Andrews, M. (2013). Community hub development: Building community through collaboration. Peterborough, ON: Peterborough Poverty Reduction Network.
[6] Cooper, Merrill. 2014. "Educational upgrading." Individual and family economic self-sufficiency. FCSS Calgary Research Brief 3. Calgary: City of Calgary, FCSS Calgary
[7] Alberta Health Services. (2014). Skills for Psychological Recover (SPR): An introductory guide for SPR providers. Edmonton, AB: Alberta Health Services.

HULL SERVICES

- **Roots of Empathy**

THEORY OF CHANGE:

Need: The Alberta Government recognizes that broad-based work needs to be done across government ministries and in communities to ensure that Alberta's children and youth are safe, healthy and in learning environments that are inclusive and welcoming. Among other desirable outcomes, a priority is that children and youth develop a sense of social responsibility, healthy relationships and positive communications skills. Part of this strategy is to support social and emotional learning outcomes and to assist students impacted by bullying behaviours.[1]

Goal: To foster the development of empathy; develop emotional literacy; reduce levels of bullying, aggression and violence; promote children's pro-social behaviours; increase children's knowledge of human development, learning and infant safety; and prepare students for responsible citizenship and responsive parenting.

Strategy: Roots of Empathy is an evidence-based program that uses the universal access point of education to deliver messages that can prevent injury and abuse, and reduce violence and aggression. Agencies working in schools provide staff trained as Roots of Empathy instructors. This gives agencies an opportunity to work with children in the classroom, and connect them to other programs and services if necessary, providing wrap-around services. Over a 27-week period, with the assistance of a Roots of Empathy instructor, students observe the interaction and attachment of a parent and baby. Students gain an understanding of the baby's growth and development, how to observe cues and respond appropriately, and gain information related to safety. Students also learn to identify, label and discuss their own and others' feelings, leading to increased emotional literacy. Recognizing emotions and understanding how actions affect others decreases the likelihood that students will physically, psychologically, and emotionally hurt each other. The program teaches perspective-taking (the cognitive aspect of empathy); problem-solving, collaboration and consensus-building; and inclusion, by involving families from diverse ethnic and cultural backgrounds with physically or developmentally challenged infants. Each year Roots of Empathy has eight training spots available for Calgary instructors. This allows us to reach more school children, meet the growing demands for programs, and deliver Roots of Empathy in the Calgary community.

Rationale: Roots of Empathy has shown consistently positive outcomes over various evaluation years, geographic areas, samples, methodologies and data sources, and has been named a model community program in several studies.[2] [3] [4] An evaluation of program outcomes found decreased aggression; increased pro-social behaviour (i.e., sharing, cooperating; increased social and emotional understanding); increased knowledge of parenting; and increased perceptions of a caring classroom environment.[5]

Indicators:
34 – Children – Grades 4-6 – Self-Esteem, Self-Confidence, Optimism
41 – Youth – Grades 7-12 – Pro-Social Attitudes, Clear Values

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[1] Alberta Human Services. 2015. Alberta's Plan for Promoting Healthy Relationships and Preventing Bullying. Alberta: Page 20.
[2] McCain, M., and J.F. Mustard. 1999. Early Years Study: Reversing the Real Brain Drain. Toronto: The Founders' Network. Page 240.
[3] McCain, M., and J.F. Mustard. 2002. The Early Years Study: Three Years Later. From Early Child Development to Human Development: Enabling Communities. Toronto: The Founders' Network. Page iii.
[4] McCain, M., and J.F. Mustard. 2002. Early Child Development in British Columbia: Enabling Communities. Toronto: The Founders' Network. Page 40.
[5] Roots of Empathy. 2008. Roots of Empathy: A Summary of Research Studies Conducted 2000-2007. Toronto: Roots of Empathy. Page 2.

IMMIGRANT SERVICES CALGARY SOCIETY

- **Community Initiatives for Immigrant Seniors Program**

THEORY OF CHANGE:

Need: In 2016, there were 169,860 Calgarians aged 65 years and older and this number is expected to rise to 231,000 in 2024[1]. The most common risk factors that increase the chances of seniors becoming socially isolated include lack of awareness of or access to community services, transportation, physical and mental health issues, income and challenges relating to technology. Immigrant seniors face a higher risk due to additional language, cultural and social barriers.[2] The social isolation of seniors can cause higher social costs, higher financial costs and the loss of the wealth of experience that older adults can bring to our communities.[3] For the benefits of older adults as well as the Calgary community, a holistic, culturally-sensitive, beneficiary-centric program is needed to reduce risk factors and increase protective factors to prevent social isolation of this vulnerable population.

Goal: To increase social inclusion by enhancing the personal capacity, self-sufficiency, social ties, support networks, and civic engagement of immigrant/refugee seniors, while strengthening the capacity of the community to support this vulnerable population through collaborative efforts.

Strategy: The CISP adopts a proactive-preventive approach with holistic, integrated programming to support immigrant/refugee seniors who are at risk of social isolation. One-on-one first language supportive counselling as well as referrals are provided on an ongoing basis. Weekly programming include educational workshops and support groups, delivered in twelve-week cycles at ISC's headquarters, satellite offices, or accessible community venues. These activities help seniors acquire useful information and life skills to enhance their day-to-day functioning in Canadian society, expand their social support networks, and create opportunities for peer-learning and peer-mentoring. Additionally, in each quarter, information sessions on senior benefits and relevant community resources, civic education classes, social events, as well as intergenerational projects and community engagement activities are organized in collaboration with community partners. These provide newcomer seniors with information, motivate civic participation, and facilitate the building of positive relationships, community ties, and a sense of belonging. Program activities are provided year-round, and the duration of client involvement in the program is flexible and based upon their needs.

Rationale: Lack of information, compounded by the inability to speak or understand English, prevents immigrant seniors from accessing services, resulting in loneliness and isolation.[4] Encouraging seniors to adopt a healthy lifestyle, helping them develop good communication and social skills, providing accessible services and transportation, creating opportunities to feel connected to and valued by others, and empowering them to take up meaningful roles in society can prevent social isolation.[5] The CISP's holistic program model is built upon these recommendations and is designed to address the physical, emotional, psychological, social and intellectual needs of immigrant/refugee seniors, effectively increasing protective factors and reducing risk factors that lead to their social isolation.

Indicators:
#4 – Positive Social Ties and/or Bonding Social Capital
#5 – Bridging Social Capital

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[1] City of Calgary. September 2015. Calgary's Aging Population: An Overview of the Changing and Aging Population in Calgary. Page 1.

[2] National Seniors Council. November 2014. Report on Social Isolation of Seniors. Pages 9-10, 15-17.

[3] Ibid., page 7.

[4] Stewart, M.; Shizha, E.; Makwarimba, E.; Spitzer, D.; Khalema, E.N.; Nsaliwa, C. D. 2011. Challenges and Barriers to Services for Immigrant Seniors in Canada: "You are among others but you feel alone", International Journal of Migration, Health and Social Care, Vol. 7 Iss: 1, pages16-32.

[5] Cooper, Merrill. 2014. "Vulnerable seniors." Positive social ties and vulnerable populations. FCSS Calgary Research Brief 4. Calgary: City of Calgary, FCSS Calgary. Page 8.

IMMIGRANT SERVICES CALGARY SOCIETY

- **Cross-Cultural Adaptation Program**

THEORY OF CHANGE:

Need: In 2016 immigrants in Calgary totaled 404,750 and came from over 240 ethnic origins.[1] Calgary's immigrant population is expected to reach almost half a million by 2020.[2] Immigrants face many needs and barriers including the need for orientation and information, employment, language training, education, cultural integration, social/emotional support, health care, housing, etc.[3] Insufficient knowledge of the official languages and lack of information about community resources and employment opportunities are common barriers, causing immigrants to lag behind in education, economic, social and political areas.[4] The lack of positive social ties is a major risk factor that leads to social isolation and social exclusion of immigrants in Canadian society.[5]

Goal: To increase social inclusion by enhancing the personal capacity, economic self-sufficiency, support networks, and positive social ties of immigrants/refugees through customized settlement/integration services and collaborative community-driven, neighborhood-based initiatives.

Strategy: CCAP provides holistic, integrated programming to enhance social inclusion and facilitate the successful settlement and integration of vulnerable immigrants/refugees in the Calgary community. We offer "doorstep" and "fingertip" services to vulnerable newcomers to ensure that intervention is provided at the earliest possible point to maximize effectiveness. One-on-one needs assessment and supportive counseling are provided to each client in first language. Employment bridging services and referrals to relevant resources/services are provided on need basis. Over a three-month period, clients are provided with a two-hour Welcome to Calgary group orientation as well as a series of information sessions/skill-building workshops covering settlement-related topics such as community resources, employment, housing, education, health services, financial management, and more. Additionally, life skills classes, support groups and community engagement initiatives are offered each quarter.

Rationale: Social isolation is a major obstacle to the well-being of newcomers.[6] Helping newcomers' develop their social networks and bridging social capital through programming strengthens their informal support system in the community.[7] Providing support to immigrants/refugees in the first year of arrival is critical for success, especially in relation to labor market integration.[8] Best practices include services that: help newcomers develop skills and knowledge to participate in society, bridge newcomers and society, and help the host community in its process of adaptation to newcomers.[9]

Indicators:
#5 – Bridging Social Capital
#7 – Social Inclusion – Participation in Neighbourhood

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[1] Calgary Economic Development. 2019. "Calgary Census 2016 Infographics." Migration to Calgary. Website. https://www.calgaryeconomicdevelopment.com/assets/Uploads/Calgary-Census-2016-Infographic.pdf.

[2] The City of Calgary. 2011. Diversity in Calgary: Looking Forward to 2020. Calgary, AB: City of Calgary, Community and Neighbourhood Services, Social Policy and Planning. Pages 1-2.

[3] Citizenship and Immigration Canada. 2006. Consultations on the Settlement and Language Training Services Needs of Newcomers. Website. http://www.cic.gc.ca/english/resources/publications/settlement/coia-summary.asp.

[4] Constant, A.F.; Kahanec, M.; Zimmermann, K.F. 2008. Attitudes Towards Immigrants, Other Integration Barriers, and Their Veracity. Pages 2-5.

[5] Cooper, Merrill. 2014. "The Issue." Positive social ties and vulnerable populations. FCSS Calgary Research Brief 4. Calgary: City of Calgary, FCSS Calgary. Page 1.

[6] Canadian Institute for Advanced Research, in partnership with Manulife. 2014. Volunteerism and Civic Engagement Among New Canadians. Page 2.

[7] Cooper, Merrill. 2014. "Vulnerable immigrants: Programs and initiatives that may be helpful in increasing positive social ties." Positive social ties and vulnerable populations. FCSS Calgary Research Brief 4. Calgary: City of Calgary, FCSS Calgary. Page 3.

[8] Grenier, G., Xue, L. March 2009. Duration of Access of Canadian Immigrants to the First Job in Intended Occupation. Pages 1 and 27.

[9] Canadian Council for Refugees. February 1998. Best Settlement Practices: Settlement Services for Refugees and Immigrants in Canada. Website. http://ccrweb.ca/sites/ccrweb.ca/files/static-files/bpfina1.htm.

IMMIGRANT SERVICES CALGARY SOCIETY

- **Volunteer Program**

THEORY OF CHANGE:

Need: Volunteerism benefits both society and individuals by strengthening trust, reciprocity and civic participation.[1] Volunteering connects immigrants to communities and strengthens their capacity to respond to challenges.[2] Immigrants account for 29% of Calgary's population[3], and are less inclined to volunteer than Canadian-born citizens, at 38% versus 45%.[4] This gap is caused by limited time and language skills, and a lack of knowledge of about the voluntary sector.[5] Nonprofits must reach out to newcomers to inform, recruit and engage them with meaningful opportunities to volunteer, while addressing cultural and linguistic differences.[6]

Goal: To increase social inclusion and enhance the personal capacity, self-sufficiency, social ties, and support networks of newcomers through volunteerism.

Strategy: Program staff match volunteers' interests, skills, experience, and preferences with volunteer placements. Job-specific training and ongoing support are provided. Volunteer opportunities are provided through ISC and our cross-sectoral network of corporate/community partners. To ensure a rewarding experience, satisfaction surveys and volunteer appreciation are incorporated into the program and cross-cultural competency training is provided to partner organizations on a need basis.

Rationale: Social isolation is an obstacle to newcomer well-being. Connecting them to community organizations through volunteering increases their civic and social engagement as well as their capacity to face challenges.[7] Volunteerism is synergistic, reciprocal and mutually beneficial – organizations gain greater capacity, communities become more inclusive, and individuals get the opportunity to grow and shape society.[8] Tangible benefits for newcomers include gaining social and professional networks, language skills and other transferable skills, as well as Canadian work experience.[9] Engaging newcomers through volunteering calls for welcoming organizations, supportive practices and intentional outreach.[10] ISC has built an extensive cross-sectoral network of over 200 partners, which enables us to offer diverse engagement opportunities that match newcomers' ability, interest and goals.

Indicators:
#6 - Social Inclusion - Social Participation
#7 - Social Inclusion - Participation in Neighbourhood

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[1] United Nations Volunteers. 2011. State of the World's Volunteerism Report 2011: Universal Values for Global Well-being. Blue Ridge Summit, PA: United Nations Publications. Page i.

[2] Canadian Institute for Advance Research, and Manulife. 2011. Volunteerism and Civic Engagement among New Canadians. Page 2.

[3] Statistics Canada. 2016. "Immigrant status and period of immigration, % distribution 2016, both sexes, age (total), Canada and census metropolitan areas and census agglomerations, 2016 Census – 25% Sample data." Immigration and Ethnocultural Diversity Highlight Tables. Website. https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/hlt-fst/imm/Table.cfm?Lang=E&T=12&Geo=00&SP=1&view=2&age=1&sex=1.

[4] Sinha, M. 2015. "Volunteering in Canada, 2004 to 2013". Spotlight on Canadians: Results from the General Social Survey. Ottawa, ON. Statistics Canada. Page 9.

[5] Canadian Institute for Advanced Research, in partnership with Manulife. 2014. Volunteerism and Civic Engagement Among New Canadians. Page 3.

[6] Ibid.

[7] Ibid. Page 2.

[8] P.S. Sladowski and M. Hientz. 2012. Building Blocks for Engaging Newcomer Volunteers: A Guide for Organizations. Ottawa: Volunteer Canada. Page 4.

[9] Citizenship and Immigration Canada. 2013. Welcome to Canada: What You Should Know. Page 64. Website. http://www.cic.gc.ca/english/resources/publications/index.asp.

[10] P.S. Sladowski and M. Hientz. 2012. Building Blocks for Engaging Newcomer Volunteers: A Guide for Organizations. Ottawa: Volunteer Canada. Page 4.

JEWISH FAMILY SERVICE (CALGARY)
- **The Way In Program – Older Adult Outreach**

THEORY OF CHANGE:

Need: Vulnerable older adults have difficulty navigating and accessing community-based supports for physical and mental health, housing, in-home supports, income supports, access to technology, assisted transportation, addiction supports, legal rights, social connection, family violence and other challenges. Risks including living alone, low income, grief and loss, language and cultural barriers, disability and transportation difficulties all of which are associated with social isolation.[1] Connecting individuals to necessary services and resources can help to improve overall physical and emotional wellbeing, social inclusion, economic self-sufficiency, and community participation for vulnerable members of at-risk groups.[2]

Goal: To increase access to supports, resources and social connections for vulnerable older adults.

Strategy: The Way In Program consists of a network of four service providers: The Calgary Chinese Elderly Citizens' Association, Calgary Seniors' Resource Society, Carya, and JFSC. Each agency offers community-based outreach support to older adults in designated geographical areas across Calgary including services for specific ethno-cultural groups. Services offered by The Way In include: assessment; information, referral and connection to resources; assistance with applications for financial benefits; supportive counselling; case management; advocacy; group activities and workshops; caregiver/ family support; connection to social and cultural programs, and; elder abuse intervention in coordination with other community services. The Way In Network delivers services with centralized access, standardized practices, evaluation, coordination, and culturally competency to seniors across the city. Program involvement is based on each individual client's needs and goals.

Rationale: When vulnerable older adults have help bridging to the resources, support and connections they need, they can "get by" or "get ahead".[3] The National Senior's Council Report on the Social Isolation of Seniors indicate improved access to information, services and programs for seniors are an important measure in combating social isolation.[4] Annual evaluation surveys of the Way In Program showed 40% of participants reported that without the help of an Outreach Worker they would not get any support otherwise.

Indicators:
15 – Long-Term Decreased Expenses; Increased Income from Sources other than Employment
16 – Poverty Reduction – Emergency / Short-Term Help

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[1] Cooper, Merrill. 2020. "Vulnerable seniors." Positive social ties and vulnerable populations. FCSS Calgary Research Brief 4. Calgary: City of Calgary, FCSS Calgary. Page 9.

[2] Cooper, Merrill. 2020. "What works to increase positive social ties for vulnerable members of at-risk groups." Positive social ties and vulnerable populations. FCSS Calgary Research Brief 4. Calgary: City of Calgary, FCSS Calgary. Page 4.

[3] Cooper, Merrill. 2020. "The issue." Positive social ties and vulnerable populations. FCSS Calgary Research Brief 4. Calgary: City of Calgary, FCSS Calgary. Page 1.

[4] National Seniors Council. 2017. "Who's at Risk and What Can Be Done About It? A Review of the Literature on the Social Isolation of Different Groups of Seniors." Government of Canada. Page 37.

Revised 2021 September 30

THEORY OF CHANGE:

Need: In 2021, 12.5 per cent of Calgary's population was aged 65 or older, with a 14.6 per cent population increase projected to occur by 2022. [1] Risk factors associated with social isolation among seniors include age over 75, low income, living alone, health or mobility difficulties, and language or cultural barriers. Currently, 26 per cent of Calgary seniors live alone and almost 40 per cent of unattached Calgary seniors live in poverty.[2] Research shows "…seniors are more likely than the general population to lack positive social ties…" and that "people who are socially isolated – are at high risk of health problems, poverty and social exclusion."[3]

Goal: To reduce social isolation among seniors by providing a safe, positive, inclusive, accessible, and affordable environment for seniors to socialize, engage in learning & recreational activities, interact with their peers and other generations, and remain connected within their community.

Strategy: This program provides accessible opportunities for social engagement, development of new friendships, and enhancement of physical, social, mental, and cognitive wellness through educational programs, recreational activities, and special events. Group activities that enhance social inclusion and engagement include active living activities such as cardio fitness, strength training, Tai Chi, yoga, Pilates, line dancing, and Zumba at a variety of functional ability levels for the inclusion of all participants from fit to frail. Cognitive group activities offered include fine arts, art therapy, music, Spanish, French, computer & internet skills, and workshops. In person group courses and workshops are offered on a quarterly schedule, once or twice a week, and free virtual programs are offered weekly. Weekly free/low-cost activities are offered such as cribbage, knitting for a cause, Mahjong, pickleball, badminton, and Spanish conversation. Specialized inclusive programs, LGBTQ+, Indigenous Drumming, Men's Shed and ESL aim to reach a diverse population.

Rationale: Preventative measures at an earlier age are best served "through good health, communication skills, social skills, accessible services, feeling connected to and valued by others, having meaningful roles in society, and having access to transportation." [4]. A study conducted during the COVID-19 pandemic emphasizes that the senior population are at a higher risk of social isolation at this time and for a longer amount of time due to the restraints of the pandemic. It concluded that older individuals benefited from forms of virtual education and fitness programs. [5]

Indicators:
4 – Positive Social Ties and/or Bonding Social Capital

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[1] City of Calgary.2021 Calgary & Region Economic Outlook

[2] Bazel, Philip, and Jack Mintz. 2014. "Income Adequacy among Canadian Seniors: Helping Singles Most." The School of Public Policy, SPP Research Papers 7(4). Page 11.

[3]Cooper, Merrill. 2014. "Vulnerable Seniors." Positive social ties and vulnerable populations. FCSS Calgary Research Brief 4. Calgary: City of Calgary, FCSS Calgary. Page 1.

[4]Cooper, Merrill. 2014. "Vulnerable Seniors." Positive social ties and vulnerable populations. FCSS Calgary Research Brief 4. Calgary: City of Calgary, FCSS Calgary. Page 9

[5] Impact of Social Isolation due to COVID -19 on Health in Older People: Mental and Physical Effects and Recommendations; J Nutr Health Aging Sep 25, 2020 https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7514226/

KERBY ASSEMBLY

- **Financial and Social Benefits**

THEORY OF CHANGE:

Need: Calgary is experiencing the overall aging of our population. As per the 2019 Census, the population of people aged 55+ has increased by 87 percent since 2016 and is expected to increase even further [1]. Calgary will be experiencing a rise in the senior (65+) population come 2022. [2] There are concerns of social isolation and income security. Risk factors associated with those aged 75+ include, living on low income, living alone, health and mobility difficulties, and cultural or language barriers. Studies show that income is a predictor of sense of belonging and that those living in poverty are more isolated and experience more stigma than higher-income people. Certain opportunities and challenges will accompany this demographic shift, moving aging-related issues to the top of the policy agenda.[3]

Goal: The goal is to reduce social isolation among low-income seniors and help them by accessing social, financial, and medical benefits and supports that they are entitled to receive. By engaging residents to increase their financial literacy they will be better able to identify opportunities for financial well-being, increase their own financial capacity and be supported in taking steps towards self-sufficiency which will enable a more sustainable livelihood, fuller community participation and increased sense of belonging.

Strategy: We ensure seniors have the correct documentation and assistance while filling out documents such as CPP, OAS, GIS, Alberta Seniors Benefit, Special Needs Assistance and Seniors bus pass. Seniors are also able to access free tax services throughout the year, and free legal advice. Staff provide workshops on wills and estates, personal directives, power of attorney, guardianship and trusteeship information and financial literacy. Emphasis is placed on both delivering information and building social capital/ belonging through participants connecting with one another.[4] This approach serves as a "soft entry point" identifying participants that would benefit from our other services. Follow-up services are provided between four and six months later.

Rationale: Income is a major determinant of health and well-being. Income assistance programs help seniors secure their basic needs, maintain independence, and continue to be contributing members of the community. For seniors who are low-income, taking steps to increase their income or decrease their spending may reduce their social isolation and increase social engagement. Financial assets are the most tangible area of focus and are an entry point.[5] Other programs that address mental health issues and wellness calls also help decrease the loneliness seniors may feel.

Indicators:
15 – Long-Term Decreased Expenses; Increased Income from Sources other than Employment

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[1] Past census results. https://www.calgary.ca. (2019).
https://www.calgary.ca/ca/city-clerks/election-and-information-services/civic-census/censusresults.html
[2] Economic outlook and population outlook. https://www.calgary.ca. (2021).
https://www.calgary.ca/cfod/finance/corporate-economics/economic-outlook-population-outlook.html
[3] Seniors and aging population. https://www.calgary.ca. (2015).
https://www.calgary.ca/csps/cns/research-and-strategy/seniors-and-aging-population.html.
[4] Positive Social Ties for Vulnerable Populations. https://www.calgary.ca. (2020).
https://www.calgary.ca/search.html?q=positive%2Bsocial%2Bties%2Bfor%2Bvulnerable%2Bpopulations%2B&W_srch_res=43
5 Page 1
[5] Positive Social Ties for Vulnerable Populations. https://www.calgary.ca. (2020).
https://www.calgary.ca/search.html?q=positive%2Bsocial%2Bties%2Bfor%2Bvulnerable%2Bpopulations%2B&W_srch_res=43
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KERBY ASSEMBLY

- **Thrive**

THEORY OF CHANGE:

Need: In 2021, 12.5 per cent of Calgary's population was aged 65 or older, with a 14.6 per cent population increase projected to occur by 2026. The population aged 75 or older is expected to grow by 14 per cent during the same period. Risk factors associated with social isolation among seniors include age over 75, low income, living alone, health or mobility difficulties, and language or cultural barriers. Currently, 26 per cent of Calgary seniors live alone and almost 40 per cent of unattached Calgary seniors live in poverty.[1] The median income for seniors living in Calgary is $22,625. [2] As the total senior population grows, the number of seniors living in low-income situations will also grow. Approximately 1 in 4 Calgary seniors indicate that it is difficult to afford food they need because of increases in living costs. There will be a need for seniors to easily access coordinated information on services and programs.[3] Today's seniors have a focus on aging in place in their community.

Goal: To utilize food supports as a gateway to reaching isolated, frail and/or immobile seniors to assist them to stay involved in the community, maintaining, or establishing supportive relationships and providing services/programming that are easily accessible.

Strategy: Thrive is a holistic approach program that is aimed at reducing food insecurity and social isolation among frail, isolated and/or low-income seniors. These programs include grocery and rescued food delivery, collective kitchens, free food markets, and supportive home and phone visits from trained staff and volunteers. Through social calls and home visits the program provides friendly visiting to engage seniors in conversation and friendship. Its navigator provision connects seniors with services outside of the home or those that can be brought into the home as needed. Services include shopping for food and putting away groceries for immobile older adults to ensure healthy eating, picking up medications, and delivery of the Kerby News monthly. The team is trained to be observant while in the home and to watch for signs that the senior is at risk of hoarding, elder abuse, or has a medical condition. Staff then alert the appropriate service providers to further support the senior. Referrals are provided to community resources such as health support, income tax support, home care, social workers, and social programs. Participants are post-tested at three months and yearly.

Rationale: Research has shown that providing food assistance will not stop the systematic issues that lead to food insecurity.[4] However, our strategy is to use food supports as a gateway to reaching isolated seniors, connecting them to the community and resources they need.[5] Research further suggests, "collective kitchens may reduce social isolation and increase social supports." [6]

Indicators:
17 – Food Security
#9 – Basic Functional Life Skills

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[1] City of Calgary. 2021. Calgary & Region Economic Outlook.

[2] Bazel, Philip, and Jack Mintz. 2014. "Income Adequacy among Canadian Seniors: Helping Singles Most." The School of Public Policy, SPP Research Papers 7(4). Page 11.

[3] City of Calgary. 2015 "Calgary's Aging Population an Overview of the Changing and Aging Population in Calgary",

[4] TarasukV, Mitchell A. Household Food Insecurity in Canada, 2017-2018 Internet. Toronto, ON: Research to identify policy options to reduce food insecurity (PROOF); 2020

[5] Miller, Anne, Brenda Simpson, Leslie Buckle, and Samantha Berger. 2015. Social Inclusion of Vulnerable Seniors: A review of the literature on best and promising practices in working with seniors. Calgary: Constellation Consulting Group. Page 63.

[6] Positive Social Ties and Vulnerable Populations. (Calgary, AB: Family and Community Support Services, The City of Calgary). Page 12

KERBY ASSEMBLY
- **Volunteer Program**

THEORY OF CHANGE:

Need: In 2021, 12.5 per cent of Calgary's population was aged 65 or older, with a 14.6 per cent population increase projected to occur by 2026. The population aged 75 or older is expected to grow by 14 per cent during the same period. Risk factors associated with social isolation among seniors include age over 75, low income, living alone, health or mobility difficulties, and language or cultural barriers. Currently, 26 per cent of Calgary seniors live alone and almost 40 per cent of unattached Calgary seniors live in poverty.[1] Volunteer engagement amongst Canadians decreases with age. In 2013, 43% of non-volunteers in their mid 50s and beyond identified health conditions as a barrier to volunteering. For those 75 and older, 64% said physical inability was to participate in volunteer activities was a barrier to volunteering. Despite the lower volunteer rate among Canadian volunteers aged 65 to 74, they give the most hours annually.[2] Flexibility will be key to engaging older adults in volunteering.

Goal: To provide a positive, safe, flexible, and inclusive environment for seniors to socialize, volunteer, and contribute to their community.

Strategy: The program provides opportunities for seniors and others to participate through volunteering their time and skills by working in flexible and meaningful roles. These include: Adult Day Program, Board of Directors, Centre Tour Guide, doing pick-ups and deliveries, planning day trips, participating in craft and knitting groups, in reception roles, in the Kerby Café, as a tax preparer or Kerby Ambassadors, assisting with the Kerby News, retail shop clerks, running pop-up bread markets, conducting presentations (virtually or in person), providing social call support for other older adults, for special events and one-off opportunities, in administrative roles or as woodshop facilitators. Volunteer opportunities are available for individuals of any age or functional ability. Volunteer positions can be done from the comfort of their home or in person depending on the position. Flexibility in the duration and frequency of volunteer is available. Vulnerable volunteers such as recent widows or widowers and recent immigrants are given the opportunity to be engaged in the centre. For example, new immigrants can practice their English language skills while working in the kitchen and widowed people can reconnect with old friends and make new ones. Volunteers are made aware of other services and programs such as courses, use of the wellness centre, and referral to the Centre's information office (e.g., for pensions) as well as to other resources in the community. After initial enrollment, participants are post-tested at four months and then yearly after.

Rationale: Research has shown that "older adults felt that their senior centre increased their level of social participation, helped them to feel more connected, and provided them with opportunities to develop meaningful relationships."[3] Specifically, 56 per cent of older seniors aged 75 plus and 52 per cent of younger seniors aged 65 to 74 volunteered because their friends volunteered, while 58 per cent of older seniors and 55 per cent of younger seniors volunteered to network and meet people.

Indicators:
6 – Social Inclusion – Social Participation

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[1] City of Calgary.2021. Calgary & Region Economic Outlook.
[2] Statistics Canada, Volunteering in Canada, 2004 to 2013, November 11, 2015.
[3] Novek, Sheila, Verena Menec, Tanya Tran, and Sheri Bell. 2013. Exploring the Impacts of Senior Centres on Older Adults. Winnipeg: University of Manitoba, Centre on Aging. Page 26.

LINKAGES SOCIETY OF ALBERTA

- **CAS, IG After School**

THEORY OF CHANGE:

Need: As mobilization and migration increase in our city and around the globe, natural family and community connections become stretched and broken, weakening the natural and bridging supports available to youth. Studies have shown that long term lack of bridging and natural networks can result in psychological distress, problem behaviours, social adjustment challenges, sparse social networks, loneliness, and challenges related to identity formation.[1]

Goal: To engage and support vulnerable Calgary youth in the development of self-esteem, self-confidence, identity, and positive citizenship through meaningful intergenerational programming and connection during after school hours.

Strategy: IG After School (Intergenerational After School) provides opportunities for vulnerable Calgary youth aged 12 – 18 to connect with trained mentor seniors during after school hours throughout the school year. Senior mentors are pre-trained by the program facilitator to support vulnerable youth to achieve the 4 program goals of confidence, interpersonal skills, responsible decision making, and natural supports. Programming is sequenced, interactive and fun, building on relationship and learning. IG After School runs once per week for two hours after school at four community locations, serving up to 80 youth per year. Interested students apply at information sessions held at target schools. Teachers may refer youth who would benefit from the program. Students are welcome and encouraged to attend the program for multiple years.

Rationale: Research shows that "for vulnerable children and youth, participation in developmental programming can afford protective of "buffering" factors that can offset multiple risk factors".[2] LINKages Society believes that intergenerational developmental programming provides an enhanced benefit to vulnerable youth, and research supports this view. Kaplan et al., report that outcomes of intergenerational programs for youth include increased school attendance, improved social skills, and improved attitudes towards seniors and aging.[3] Further, research supports the idea that bridging supports can play a critical role for vulnerable youth "because they bring some diversity to (our) networks. Bridging ties such as mentors, teachers, and coaches help people connect to information and resources beyond what's available within their immediate group". [4]

Indicators:
38 – Youth – Grades 7-12 – Self-Esteem, Self-Confidence, Identity

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[1] Dozois, Elizabeth. 2017. Working with vulnerable youth to enhance their natural supports: A practice framework. Calgary: The Change Collective. Page 11.

[2] Cooper, Merrill. 2014. "The issue". Positive child and youth development. FCSS Calgary Research Brief 1. Calgary: City of Calgary, FCSS Calgary. Page 4.

[3] Kaplan, M.; Liu, S.; Hannon, P. 2006. "Intergenerational engagement in retirement communities: A case study of a community capacity-building model." *Journal of Applied Gerontology,* 25(5), 406-426.

[4] Dozois, Elizabeth. 2017. Working with vulnerable youth to enhance their natural supports: A practice framework. Calgary: The Change Collective. Page 5.

MCMAN YOUTH, FAMILY AND COMMUNITY SERVICES ASSOCIATION

- **Hope Homes Program**

THEORY OF CHANGE:

Need: Homeless youth lack the support of positive influences such as peers and family members when faced with stressful situations. For youth living on the streets, many do not have the basic skills, personal capacity, or social supports to meet the demands of their new environment.[1]

Goal: To help youth aged 15 to 24 who are experiencing homelessness to develop life skills that promote a healthy and resilient lifestyle and facilitate a successful transition to independence.

Strategy: The program provides a continuum of support services for homeless youth, where a case manager helps the youth to work on the issues that have led to homelessness. The individual case management plan consists of individualized goals, which the young person identifies. These goals support the areas of school, employment, or connection to a meaningful day program, in addition to assisting the youth in securing and maintaining safe and affordable housing. Youth are provided with a range of housing options that are responsive to their changing needs over time. Life skills training focuses on increasing self-esteem, confidence, and positive decision-making, building communication skills, and increasing self-awareness. Staff meet with the youth once a week to ensure their basic needs are being met and that they are increasing their knowledge of available community resources. To help enlarge their natural support network, the case manager supports the youth in identifying important individuals in their life who will continue to support their transition to independence. Youth are generally involved in the program for 12 to 24 months.

Rationale: "Young people transitioning from systems such as child intervention, mental health and addictions, and justice must be linked to housing options and necessary supports and services."[2] Youth experiencing homelessness require life skills guidance and support.[3] This can be achieved by providing positive, stable, and appropriate learning environments and healthy natural supports. With these, youth will decrease their risk of becoming chronically homeless and will learn the skills needed to keep themselves safe. These youth require a plan and intervention, which includes timely access to safe and secure housing. Research suggests that if intervention does not happen quickly, youth may become entrenched into homelessness within two months.[4] [5]

Indicators:
18 – Housing Stability and Suitability

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[1] Chan, Kitty, Kimberley Garland, Karima Ratansi, and Batshiva Yeres. 2007. "Viewing Youth Homelessness through an Occupational Lens." Occupational Therapy Now 9.4: 1.

[2] Supporting Healthy and Successful Transitions to Adulthood: A Plan to Prevent and Reduce Youth Homelessness. n.d. Edmonton: Government of Alberta. p. 23.

[3] Chan, Kitty, Kimberley Garland, Karima Ratansi, and Batshiva Yeres. 2007. "Viewing Youth Homelessness through an Occupational Lens." Occupational Therapy Now 9.4: 4.

[4] Gidosh, Sara. n.d. Environmental Scan Study: Services in Calgary for Youth Experiencing Homelessness. Calgary: Calgary Homeless Foundation, Calgary Action Committee on Housing and Homelessness. Pages 5-7.

[5] McLean, Linda. 2005. Seeking Sanctuary: An Exploration of the Realities of Youth Homelessness in Calgary. Calgary: Broadview Applied Research Group Inc. Page 25.

MCMAN YOUTH, FAMILY AND COMMUNITY SERVICES ASSOCIATION

- **Youth Alternative Program**

THEORY OF CHANGE:

Need: Vulnerable children and youth require additional skills to prevent them from engaging in behaviours that may place them at greater risk. "Reduced risk factors and increased protective factors are more likely to be observed among youth who have successfully absorbed new knowledge and changed their attitudes."[1] "Young people need a wide range of intra- and interpersonal skills to face the complex challenges of today's world."[2]

Goal: To enable children and youth to increase their self-esteem and self-confidence, as well as their decision-making and relationship skills so they can make safe life choices.

Strategy: The Youth Alternative Program is targeted to children and youth in two age groups: seven to 11 and 12 to 19 years. It is based on the Botvin LifeSkills Program curriculum, in which 10 facilitated workshops are offered in weekly two-hour sessions. The program is provided in both community and school settings. The curriculum focuses on key skills and goals aimed at increasing individual capacity in areas including self-esteem, decision-making, risk-taking, substance misuse, violence prevention, coping skills, and healthy relationships. The workshops aim to get at the root causes of risk factors and teach skills to help vulnerable children and youth make positive life choices, enhance their overall well-being, and prevent them from engaging in violence and high risk activities. Ongoing intensive one-to-one support is offered during or after they have completed the workshops to assist participating children or youth to accomplish their goals and practice skills learned with guidance and support from a case manager. Parents or caregivers are engaged in supporting the transfer of skills learned though early involvement in parent orientation sessions.

Rationale: Vulnerable children and youth risk becoming involved in high risk behaviours when adequate skills, confidence, and healthy relationships are not in place. The Botvin Life Skills program has demonstrated positive results in reducing at-risk behaviours by using a competence enhancement prevention approach to develop personal and social skills including "decision-making and problem-solving skills, cognitive skills for resisting interpersonal and media influences, skills for increasing personal control and enhancing self-esteem (goal-setting and self-directed behaviour change techniques), adaptive coping strategies for managing stress and anxiety, assertive skills, and general social skills."[3] Youth who experience these types of developmental learning opportunities and supports are more likely to be healthy, confident, and productive teenagers who mature into responsible, skilled adults.

Indicators:
26 – Children – Grades 4-6 – Helps and Respects Others
31 – Youth – Grades 7-12 – Good Social Skills

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[1] Laliberté, D., G. Rossario, L. Léonard et al. 2014. Results of Crime Prevention Programs for 12 to 17 Year Olds. National Crime Prevention Centre Research Report 2015-R006. Ottawa: Public Safety Canada. Page 14.
[2] Jacobs Foundation, with Clare Hanbury, and Tina Malti. 2011. Monitoring and Evaluating Life Skills for Youth Development. Volume 1: The Guidelines. Zurich: Jacobs Foundation. Page 13.
[3] Botvin, Gilbert. 2000. "Preventing drug abuse in schools: Social and competence enhancement approaches targeting individual-level etiologic factors." Addictive Behaviors 25(6): 887-897.

METIS CALGARY FAMILY SERVICES SOCIETY
- **CAS, Little Thunderbirds**

THEORY OF CHANGE:

Need: The 2006 Aboriginal children's survey found that 51 per cent of Aboriginal children lived in communities rated as 'fair' or 'poor' as a place with First Nations, Métis, or Inuit cultural activities. In the same survey, only 28 per cent of young Métis children had participated in or attended 'traditional' First Nations, Métis, or Inuit activities such as singing, drum dancing, fiddling, gatherings, or ceremonies.[1] Less than one-third of Métis children had someone who helped them to understand Aboriginal history and culture.

Goal: To increase social inclusion among vulnerable Aboriginal children through specific culturally based activities such as sports, art, music, and traditional teachings from Aboriginal adults and Elders.

Strategy: The Little Thunderbirds after-school program gives children in Grades 4 to 6 a chance to develop positive social ties with peers and with other adults, and to experience an increase in social connections, cultural identity, and self-esteem. The program uses SAFE guidelines as fundamentals in program design and delivery. Programming is sequenced (has a curriculum that builds on previous skills), active (includes recreation time, and health and wellness teaching), focused (each lesson is planned in advance and focuses on Aboriginal culture and traditions), and explicit (designed to promote positive Aboriginal self-identity, literacy development, and leadership skills). Sessions include Aboriginal Dance, Cultural Teachings, Elder Mentoring, Ceremony, and Language. Little Thunderbirds is offered to 25 to 30 children in 12-week cycles from September to June. It runs Monday to Thursday from 3:00 to 6:00 p.m.

Rationale: Research[2] suggests that increasing participation in structured, along with unstructured, programming may have additional benefits for participants, noting that "the motivators of recreation, sport, and friends are essential program strategies necessary to especially engage harder-to-reach adolescent populations." In addition, "the developmental outcomes of children and youth who participate in high-quality after-school programming four or five days a week are generally better than those of children and youth who regularly spend time with no adult supervision after school."

Indicators:
32 - Children – Grades 4-6 – Self-Esteem, Self-Confidence, Optimism
42 – Children – Grades 4-6 - Activities
48 – Cultural Role Modelling and Mentoring

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[1] Statistics Canada. 2008. Aboriginal Children's Survey, 2006: Family, Community and Child Care. Ottawa: Statistics Canada, Social and Aboriginal Statistics Division. Catalogue No. 89-634-X. Pages 19-20.
[2] Cooper, Merrill. 2014. "After-school programs." Positive child and youth development. FCSS Calgary Research Brief 1. Calgary: City of Calgary, FCSS Calgary. Pages 6-7.

METIS CALGARY FAMILY SERVICES SOCIETY
- **Little Dancing Buffalo Cultural Teaching Program**

THEORY OF CHANGE:

Need: The 2006 Aboriginal children's survey found that 51 per cent of Aboriginal children lived in communities rated as 'fair' or 'poor' as a place with First Nations, Métis, or Inuit cultural activities. In the same survey, only 28 per cent of young Métis children had participated in or attended traditional First Nations, Métis, or Inuit activities such as singing, drum dancing, fiddling, gatherings, or ceremonies. Less than one-third of Métis children had someone who helped them understand Aboriginal history and culture.[1]

Goal: To increase social ties among Aboriginal children aged nine to 12 through culturally safe and promising healing practices offered in a traditional cultural education program.

Strategy: Program modules are based on the Seven Sacred Teachings (Truth, Humility, Respect, Courage, Wisdom, Honesty, and Love) and incorporate regalia (significance and construction), dance variations, traditional values, and Aboriginal history. The program uses SAFE guidelines as fundamentals in program design and delivery. Programming is sequenced (has a curriculum that builds on previous skills), active (includes recreation time, and health and wellness teaching), focused (each lesson is planned in advance and focuses on Aboriginal culture and traditions), and explicit (designed to promote positive Aboriginal self-identity). The Little Dancing Buffalo program runs every Thursday from 6:00 to 8:00 p.m. for 35 weeks from October through June. The skills and knowledge achieved migrate from the group setting to the home and community through a community Pow Wow and graduation held in June of each year that celebrates each individual's success.

Rationale: Little Dancing Buffalo emphasizes beliefs and values in accordance with the Aboriginal worldview of education, which is more holistic rather than individualistic.[2] Values-based activities designed to increase social ties are delivered by Aboriginal role models and mentors, as recommended in the literature.[3] Aboriginal cultures are not transplanted intact to a new environment so urban life presents a loss. "While many urban Aboriginal people retain connections to their rural and reserve communities of origins, some do not find community among other urban Aboriginal people, in urban institutions."[4] Little Dancing Buffalo helps to rebuild these important connections. It provides opportunities for social inclusion, identity development, and participation in healing practices for Aboriginal children by increasing their social support networks, as recommended in the literature.[5]

Indicators:
24 – Children – Grades 4-6 – Positive Friendships / Social Skills
48 – Cultural Role Modelling and Mentoring

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[1] Statistics Canada. 2008. Aboriginal Children's Survey, 2006: Family, Community and Child Care. Ottawa: Statistics Canada, Social and Aboriginal Statistics Division. Catalogue No. 89-634-X. Pages 19-20

[2] Pinnow, J. 2013. The Wisest Sister (Draft). FCSS Calgary Research Brief No. 6. Calgary: City of Calgary, FCSS Calgary. P 12.

[3] Pinnow, J. 2013. The Wisest Sister (Draft). FCSS Calgary Research Brief No. 6. Calgary: City of Calgary, FCSS Calgary. P 38.

[4] Peters, E.J. 2004. Three Myths about Aboriginals in Cities. Breakfast on the Hill Seminar Series. Ottawa: Canadian Federation for the Humanities and Social Sciences. Page 11.

[5] Cooper, Merrill. 2009. "Social Isolation." Outcome: Positive parenting and family functioning. FCSS Calgary Research Brief No. 2. Calgary: City of Calgary, FCSS Calgary. Page 5.

METIS CALGARY FAMILY SERVICES SOCIETY
- **Native Network Positive Parenting Program**

THEORY OF CHANGE:

Need: The Aboriginal Healing Foundation describes the negative impact of residential schools and the legacy of intergenerational trauma and poor parenting on Aboriginal families.[1] Many significant mental health, social, and economic problems are linked to disturbances in family functioning and the breakdown of family relationships.[2] Although family relationships are important in Aboriginal communities, parents generally receive little preparation beyond the experience of having been parented themselves; with most learning on the job through trial and error.[3] The demands of parenthood are further complicated when parents do not have access to extended family support networks (e.g., grandparents or trusted family friends) or partners, or experience the stress of separation, divorce, or re-partnering.[4]

Goal: To address the legacy of residential schools on parenting through sequential learning models of child and parent development in order to assist parents in strengthening individual and family functioning, and increase their sense of cultural belonging and feeling supported.

Strategy: The Native Network Positive Parenting Program will deliver three or four Aboriginal specific group sessions per year (quarterly), which will consist of a series of eight, four-hour workshops with groups of 10 to 12 individuals, serving 50 to 60 families per year. Groups are facilitated by accredited Positive Parenting Program practitioners and focus on positive parenting strategies, active skills training, problem solving, and developing a personalized parenting plan reflective of a promising healing practice. The workshop modules are Positive Parenting, Why Children Behave the Way They Do, Helping Children Develop, Managing Misbehaviours, Planning Ahead, Putting It All Together 1, Putting It All Together 2, and Program Close.

Rationale: To address conditions in an urban Aboriginal environment, culturally recognizable and relevant program activities and services are needed to help re-build participants' lives. This builds a self-perpetuating cycle of healing by understanding and addressing the root causes of parenting concerns from participants and helping individuals and families to begin a path of "healing and wellness towards community-driven decolonization over time."[5]

Indicators:
19 – Family Cohesion – Parent / Adult Questions
20 – Parenting – Parent Questions
47 – Cultural Safety and Cultural Programming
50 – Sense of Cultural Belonging and Feeling Supported

[1] Aboriginal Healing Foundation. 2008. The 2008 Annual Report of the Aboriginal Healing Foundation. Ottawa: Aboriginal Healing Foundation. Page 14.

[2] Chamberlain, P., and G.R. Patterson. 1995. "Discipline and child compliance in parenting." In Bornstein, M.H. (ed.). Handbook of Parenting, Vol. 4: Applied and Practical Parenting. Mahwah, NJ: Lawrence Erlbaum. Pages 205-225.

[3] Sanders, Matthew, Carol Markie-Dadds, and Karen Turner. 2003. Theoretical, Scientific and Clinical Foundations of the Triple P-Positive Parenting Program: A Population Approach to the Promotion of Parenting Competence. Parenting Research and Practice Monograph No. 1. St. Lucia, QLD: University of Queensland, Parenting and Family Support Centre. Page 1.

[4] Sanders, M.R., J.M. Nicholson, and F.J. Floyd. 1997. "Couples' Relationships and Children." In Halford, W.K., and H.J. Markman (eds.). Clinical Handbook of Marriage and Couples Interventions. Chichester, UK: John Wiley & Sons. Pages 225–253.

[5] Pinnow, Joanne. 2014 "Reframing programs – A journey of healing practices towards decolonization." Aboriginal brief. FCSS Calgary Research Brief 6. Calgary: City of Calgary, FCSS Calgary. Page 4.

MILLICAN OGDEN COMMUNITY ASSOCIATION
- **CAS, Mo's Place**

THEORY OF CHANGE:

Need: In Ogden, 18.2 per cent of the households have low-incomes versus 14.2 per cent in Calgary. The adult unemployment rate is 1.1 per cent higher than it is for Calgary as a whole, and the number of lone-parent families is 11.8 per cent higher than for Calgary overall. Only 30.4 per cent of people in Ogden have a high school diploma, 29.7 per cent have no diploma, certificate or degree, and only 5.1 per cent of residents have a university degree. Lower education levels indicate a need for structured after-school programming to promote academic learning.

Goal: To provide an afterschool program for the children in the community of Millican Ogden that provides activities, interactions and relationships that increase the participants self-concept, encourages positive social interactions, provides opportunities for improving school grades and values community volunteerism.

Strategy: Mo's Afterschool program is located in the Millican Ogden area and is available Monday through Thursday from 3 pm through to 6 pm. The program runs from September until December and January until June. Parents and youth who are interested in Mo's meet with the Youth Coordinator and are registered in the program. Personal and social skills are developed and enhanced through activities such as board games, classes, field trips, guest speakers and group activities and projects. All activities and programming are structured to follow SAFE principles (sequenced, active, focused and explicit). To support academic success, Mo's provides tutoring that youth can sign up for, which is tailored to meet the needs of each student who requests help. Activities are hands on and interactive. They include dance, recreational/athletic activities, discussions, culture days, community outings, community volunteering and events and team projects. Participating in high quality programming has proven to improve the outcome educationally, emotionally and physically of young people from 12 to 17. As a result, youth become more involved in their community, have a supportive and healthy peer group and do better academically.

Rationale: Research shows that using the S.A.F.E strategy (sequenced, active, focused, and explicit) has a positive impact on academic, social, and emotional development.[1] Several studies found that long-term, structured, and progressive programs helped children and youth to build strong peer groups; learn a wide range of skills as well as personal and practical competencies; provided reliable and predictable relationships with positive adult role models; and fostered a sense of accomplishment and self-worth.[2] The studies revealed that participation improved outcomes in areas such as academic achievement and educational aspirations, self-efficacy and self-esteem, sense of personal value, and hopefulness.

Indicators:
38 – Youth – Grades 7-12 – Self-Esteem, Self-Confidence, Identity

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[1] Positive child and youth development 'After School Programs' FCSS Calgary research Brief 1 pg. 6-7

[2] Positive child and youth development 'Developmental programming' FCSS Calgary research brief 1 pg. 4 Calgary After-School Programming Guide City of Calgary

MILLICAN OGDEN COMMUNITY ASSOCIATION

- **Community Connections**

THEORY OF CHANGE:

Need: Community social statistics show that 18.2 per cent of households in Ogden have low income, versus 14.2 per cent in Calgary overall. The adult unemployment rate is 1.1 per cent higher than for Calgary as a whole, and the number of lone-parent families is 11.8 per cent higher than for Calgary. Only 30.4 per cent of people in Ogden have a high school diploma, 29.7 per cent have no diploma, certificate or degree, and only 5.1 per cent have a university degree. This shows that individuals and families in this community are vulnerable and that poverty is a significant issue.

Goal: To provide parents the skills and training they need to ensure healthy outcomes for their children, to provide access and support to resources for individuals and families ensuring they have what they need to prosper emotionally and physically, and to provide opportunities for social and natural supports to increase positive social ties.

Strategy: The program provides for parents a mix of both structured and unstructured programs, group and individual sessions that build parent competence, knowledge and positive social ties and consequently reducing risk factors. The structured programs are developed to provide parenting education to help parents learn parenting skills, problem solving skills and how to effectively and respectfully communicate with their children. The parenting education courses are offered twice a week for two hour sessions.These programs help parents successfully manage daily living, have better relationships with their children, better understand their children and consequently can more effectively to guide their children with school readiness. These programs also provide social support for parents. Providing social support is key to reducing the risk factor of isolation as the research briefs shows us that "socially isolated parents are more likely to use poor parenting practice"[1] and there is evidence to show "social support helps to alleviate parental stress through emotional support and childcare assistance."[2] The parent/child developmental play group runs twice a week for two hour sessions and focuses on parent coaching and encouragement, building personal networks, and educating parents on age appropriate activities/behavior for their children. On-going one on one support is given to individuals and families to ensure they are connected to the resources they need, and to work with them on family goal setting and building social connections.

Rationale: "Poor quality neighborhood resources and lack of access to existing neighborhood resources and lack of access to existing neighborhood resources foster social exclusion of residents"[3]. Research also shows "low income families tend to be socially isolated and reduced social support restricts the ability of the family to buffer the direct effects of poverty".[4] For low income, isolated families and individuals, quality support programs can improve parenting skills, enhance the well being of the family and individual, and provide that buffer from the direct effects of poverty. "Scores of studies have investigated the ways in which socially isolated families can benefit from positive social ties and strengthened family supports systems and an extensive body of research documents of both formal and informal community supports.[5] By strengthening the family structure and social networks, residents of the community can become contributing members and the children healthier outcomes.

Indicators:
7 – Social Inclusion-Participation in Neighbourhood
15 – Long-Term Decreased Expenses; Increased Income from Sources other than Employment
16 – Poverty Reduction – Emergency / Short-Term Help
#19 – Family Cohesion Parent Questions

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[1] Positive Parenting and family functioning FCSS Calgary Research Brief No.2 pg.8
[2] Positive Parenting and family functioning FCSS Calgary Research Brief No.2 pg.8
[3] Positive Parenting and family functioning FCSS Calgary Research Brief No.2 pg.8
[4] Positive Social ties and vulnerable populations FCSS Calgary Research Brief No. 4 Pg. 5
[5] Positive Social Ties and vulnerable populations FCSS Calgary Research Brief No.4 Pg. 5

MISKANAWAH COMMUNITY SERVICES ASSOCIATION

- **Nitsanak Mamawintowak ("Families coming together" in Cree)**

THEORY OF CHANGE:

Need: This program explicitly targets healing from intergeneration trauma. One of the fastest growing demographic groups in Calgary is young Indigenous people (26 per cent increase versus 13 per cent for the general population). Indigenous children are more likely to be born to younger mothers, to less educated parents, into one-parent homes, and into poverty; 37 per cent of Aboriginal children live under the LICO[1]. Indigenous children represent 69 per cent of the children in Alberta's child welfare system.[2] Intergenerational trauma poses additional risks including transmission of learned negative parenting behaviours. Family conflict, parental stress, and attachment problems in children are some of many potential psychological responses to intergenerational trauma at the family level.[3]

Goal: To prevent negative child outcomes and promote healthy development and healing in Indigenous children and their families.

Strategy: The program provides accessible, culturally-based parent education and support through home visitation supports for Indigenous families with children pregnancy to 12 years of age. The strategy may combine leading edge intensive parenting and child development curriculum with traditional child rearing knowledge and cultural guidance for families to engage in wise-practices in healing and parenting. Cultural workers, traditional knowledge keepers and Elders provide additional guidance, connection and access to ceremony. Trained home visitors offer up to 50 visits a year, once per week for at least two hours in the family home or a family identified safe place, typically for one year with extensions if needed. The home visitor is a highly trained para-professional who supports the family in cultural and community connections, educates on parenting and brain development, helps build family skills, monitors progress and shares traditional child-rearing and family practices. Visits may cover community resources, developmental milestones and strategies to reach them, and daily developmental activities. The program assumes that healing the wounds of intergenerational trauma requires strengthening connections and identification with Indigenous cultural knowledge and practices and people.

Rationale: The program draws on Miskanawah's former Nehiyawn Kihokewin program and the Harvard Center for the Developing Child's research on early brain development and development in the middle child years. It draws upon evidence-informed models of home visitation/parent education such as: Healthy Families of America, Hand-in-Hand, and Nurturing Parenting and provides an opportunity for Indigenous families to access home-based supports through the community and at an earlier stage of risk, rather than through systems which they may find threatening. Cultural practices have been lauded as extraordinarily healing for intergenerational trauma.[4]

Indicators:
50 – Sense of Cultural Belonging and Feeling Supported

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[1] Statistics Canada. 2006. "Calgary community profile." Ottawa. Government of Canada.
[2] Kornik, S. 2016, July 19. "Alberta reports urge child welfare system changes after finding aboriginals account for 69%". Global News
[3] Blackstock, Cindy. 2016. Cindy Blackstock Presents at Mount Royal University. Mount Royal University. March 16, 2016. Calgary AB.
[4] Pinnow, Joanne. 2014. Aboriginal Brief. FCSS Calgary Research Brief 6. City of Calgary, FCSS Calgary.

MOMENTUM COMMUNITY ECONOMIC DEVELOPMENT SOCIETY

- **Asset Building Program**

THEORY OF CHANGE:

Need: Families with lower incomes face multiple barriers to building and maintaining income and savings. The five-year poverty trend in Calgary suggests on average, 151,000 (10.06%) Calgarians live on low incomes, between 2015 to 2019[1]. Nationally, about a quarter of all Canadians have an emergency savings fund in place, yet more than 50% of Canadians worry about future costs[2]. Lack of assets translates into difficulty meeting basics needs, shortfalls that delay retirement and vulnerability to predatory lenders[3]. Recent research highlights that 51.5% of Canadian households with low incomes have had to draw down on savings as of June 2021 and 40% report they are unable to meet their essential expenses[4].

Goal: To support people living on low incomes to build a sustainable livelihood through our Individual Development Account (IDA) matched savings programs by setting goals and learning to manage their financial circumstances while building a personal savings behavior. We also build the capacity of non-profit agencies to deliver their own IDA programs to increase the access to savings programs in Calgary.

Strategy: Three IDA programs are offered twice a year at Momentum: Youth Fair Gains for youth aged 16 to 24; Savings Circles for adults living at or below 85 per cent of LICO; and Family Saves for families living at LICO or below. Seven to thirteen mandatory financial literacy workshops are offered over the course of six to nine months. Participant savings of $15 - $50/month are matched with $30 - $200/month. Program impact is leveraged by offering training and support to community agencies to deliver matched savings programs.

Rationale: Many low-income households have few significant assets, such as a home, savings for retirement, or emergency expenses[5]. Financial education and access to savings opportunities are necessary and effective in improving financial outcomes for low-income households[6]. Assets are key gateways to opportunity, enabling people living in poverty to access proven paths to prosperity: education, training, employment, and home ownership[7].

For large-scale social change, understanding the complexity of the issue and working with cross-sector perspectives is key[8]. Therefore, Momentum is a founding member of Aspire, Calgary's Financial Empowerment Collaborative, a collective impact initiative committed to achieve the Enough for All goal that "every Calgarian has the income and assets needed to thrive[9]."

Indicators:
10 – Financial Literacy / Assets / Debt

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[1] Statistics Canada. Table 11-10-0135-01 Low-income statistics by age, sex and economic family type

[2] Johnathan Chevreau. 2017. Only a quarter of Canadians have a rainy-day fund, but more than half worry about rising rates. Financial Post. Retrieved from https://business.financialpost.com

[3] Calgary Neighbourhoods. 2020. Individual and family economic self-sufficiency. (Calgary, AB: Family & Community Support Services, The City of Calgary).

[4] Prosper Canada and Seymour Financial Resilience Index TM and 2021, 2020 and 2018 Financial Well-Being studies. Accessed here: Final-Detailed-Seymour-Low-Income-Report_Nov2021.pdf (financialhealthindex.org)

[5] Calgary Neighbourhoods. 2020. Individual and family economic self-sufficiency. (Calgary, AB: Family & Community Support Services, The City of Calgary).

[6] Prosper Canada. 2013. Financial Empowerment: Improving financial outcomes for low-income households. Toronto: Prosper Canada. Accessed here: http://prospercanada.org/prospercanada/media/PDF/Publications/Financial-Empowerment-Brochure.pdf

[7] ABLE Financial Empowerment Network. 2017. Financial Empowerment: What it is and how it helps. Accessed here: https://prospercanada.org/getattachment/8ff5b01c-ddab-4383-bc47-cdde1a35176f/Financial-Empowerment-What-it-is-and-how-it-helps.aspx

[8] Liz Weaver. 2018. Creating containers and Co-design: Transforming collaboration. Waterloo, ON: Tamarack - An Institute for Community Engagement. Accessed here: https://www.tamarackcommunity.ca/library/paper-creating-containers-and-co-design-transforming-collaboration

[9] Vibrant Communities Calgary. 2018. 2018 Implementation Plan, Enough for All Strategy: Achieving Impact Together. Accessed here: https://cdn2.hubspot.net/hubfs/316071/VC/2018%20Implementation%20Plan%20E4A.pdf

MOMENTUM COMMUNITY ECONOMIC DEVELOPMENT SOCIETY
- **Public Policy Program**

THEORY OF CHANGE:

Need: According to Statistics Canada, 3.7 million (10.1%) Canadians lived on low incomes in 2019, using the market basket measure. The five-year poverty trend in Calgary suggests on average, 151,000 (10.06%) Calgarians lived on low incomes, between 2015 to 2019[1]. The systems society has in place to aid people living in poverty are often not strong enough to lift them out of poverty. There is a need to address poverty at a systems level to reduce barriers that make escaping poverty more difficult, thus enabling all Calgarians to achieve and maintain a sustainable livelihood.

Momentum's Public Policy Program is grounded in our work with Asset Building and other program participants. The demographics of Momentum's participants living on lower incomes are diverse, including 62% women, 53% immigrants, 17% persons with disabilities and 12% Indigenous persons (2020). Over 50 percent of Momentum participants had household incomes below $25,000.

Goal: To advance systems change through policy research and advocacy in poverty reduction and community economic development. The public policy program aims to promote policies that reduce barriers to escaping poverty, and to help people living in poverty to increase their income and assets.

Strategy: This program focuses on systemic approaches to poverty reduction by collaboratively developing social and community economic development policy at the municipal, provincial, and federal levels. Program staff work with civil servants and elected officials to create and change public policy to address the root causes of poverty so vulnerable people are more able to exit poverty. Key policy efforts include the development and implementation of poverty reduction strategies related to workforce development, consumer protection from predatory lending practices, and economic inclusion, such as changes to government procurement practices. COVID-19 has not significantly changed the way the program operates, except by moving most activities online.

Rationale: Poverty can neither be prevented nor reduced through program and service provision alone. The root causes and systemic contributors to poverty must also be addressed. Charities in Canada can have a key role informing the development of public policy that can addresses social issues like poverty[2]. Research shows that reducing poverty through systems and policy change is important for Alberta since poverty has a significant cost[3].

For the most part, structural issues can only be addressed through economic and social policy levers and large-scale programming…[4]. An example of Momentum's Public Policy program impact to reduce systemic barriers to move out of poverty is the result of changes to payday loan and high-cost credit rules in Alberta that have saved Albertans an estimated $10M in interest payments annually[5].

Indicator:
Policy or Systems Change

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[1] Statistics Canada. Table 11-10-0135-01 Low income statistics by age, sex and economic family type
[2] The Moral Imperative for Policy Advocacy Dr. Roger Gibbins, 2016. The Philanthropist. http://thephilanthropist.ca/2016/02/the-moral-imperative-for-policy-advocacy/
[3] Holzer HJ, Schanzenbach DW, Duncan GJ, Ludwig J. The Economic Costs of Poverty in the United States: Subsequent Effects of Children Growing Up Poor. Center for American Progress; 2007. The Economic Costs of Poverty - Center for American Progress Accessed March 16, 2020 and Briggs, Alexa, and Celia R. Lee. 2012. Poverty Costs: An Economic Case for a Preventative Poverty Reduction Strategy in Alberta. Calgary: Vibrant Communities Calgary, and Action to End Poverty in Alberta.
[4] Calgary Neighbourhoods. 2020. Individual and family economic self-sufficiency. (Calgary, AB: Family & Community Support Services, The City of Calgary).
[5] Creating Change: Momentum's Contribution to High-Cost Credit Reform in Alberta. 2021. Creating-Change-Momentums-Contribution-to-High-Cost-Credit-Reform-in-Alberta-web.pdf

MOMENTUM COMMUNITY ECONOMIC DEVELOPMENT SOCIETY

- **Thriving Communities Program**

THEORY OF CHANGE:

Need: The five-year poverty trend in Calgary suggests on average, 151,000 (10.06%) Calgarians live on low incomes, between 2015 to 2019[1]. Many groups over-represented in poverty, such as women, new Canadians or people living with disabilities, are often working in low skill and low wage jobs. The global pandemic has further exacerbated these systemic failures within our economy. VCC and the Canadian Poverty Institute estimate that there were an additional 77,000 people at risk of poverty in our city[2]. With 70% of employment in Canada being generated through small to medium sized businesses, we need solutions that both support business success and their role in creating inclusive, living wage employment opportunities for others[3]. As outlined in Calgary's Enough for All strategy, we need to 'do business differently' so that more Calgarians have the income and assets to thrive.

Goal: To build the capacity of community change makers to increase community economic development (CED) activity within communities to reduce poverty and increase social inclusion. The long-term goal is a thriving local economy, where people, community, and local businesses can flourish.

Strategy: Momentum's Thriving Communities works with local businesses, social enterprises, and citizens to advance community economic development (CED) to reduce poverty. Three CED strategies include: i) *Movement and Ecosystem Building* to create the supports required to advance CED and shift consumer behavior to support businesses that generate community impact. Momentum's role hosting the Be Local Network is key movement building activity to support businesses committed to their social and environmental impact; ii) *Community Activation* to launch and/or scale community enterprise initiatives by people living in marginalized communities and other community champions (Community Social Workers (CSWs), non-profits, businesses) to increase social inclusion; and, iii) *Business Training* where entrepreneurs learn how to create meaningful employment for themselves through self employment and where businesses learn to incorporate social impact goals into their operations, resulting in better jobs for employees through living wage jobs and inclusive hiring practices.

Rationale: For those who are able to work, the key to preventing social exclusion is employment in non-precarious jobs[4]. CED focuses on long-term, enterprise-based strategies that build on existing resources and talents in the community to address precarious employment and increase social inclusion. CED focuses on individuals and neighborhoods that are traditionally disadvantaged to develop their knowledge, skills, and assets[5]. This work has been successfully implemented in other communities[6]. Thriving Communities aligns with and supports the CED strategy adopted by The City of Calgary[7].

Indicators:
Community Development

[1] Statistics Canada. Table 11-10-0135-01 Low-income statistics by age, sex and economic family type

[2] Vibrant Communities Calgary and Canadian Poverty Institute. (October 2020). The Risk and Depth of Poverty in Calgary: A Socio-DemographicProfile.2016.Accessedhere: https://static1.squarespace.com/static/595d068b5016e12979fb11af/t/5fbe8de93570fb44d1dafe03/1606323691553/The-Depth-of-Poverty-in-Calgary-Final+%281%29.pdf

[3] Ali, T., Judson, D., Kimmel, J.M., Souffrant, K. (Mar 10, 2021). Placed-based policy options for entrepreneurship in a post-COVID Canada. Public Policy Forum. Accessed here: https://apo.org.au/sites/default/files/resource-files/2021-03/apo-nid312406.pdf

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[5] Canadian CED Network. What is CED. Accessed here: https://ccednet-rcdec.ca/en/what_is_ced

[6] Canadian CED Network. Pan-Canadian Community Development Learning Network. Profile on Story Tellers Foundation (2005). Accessed here: Microsoft Word - Storytellers-20060510.doc (ccednet-rcdec.ca)

[7] City of Calgary. Neighbourhood Services. Community Economic Development Strategy. Accessed here: https://www.calgary.ca/csps/cns/strong-neighbourhoods/strong-neighbourhoods.html

OGDEN HOUSE SENIOR CITIZENS' CLUB

- **Seniors Programs**

THEORY OF CHANGE:

Need: In 2017, 11 per cent of Calgary's population was aged 65 or older, with a 23 per cent population increase projected to occur by 2022. The population aged 75 or older is expected to grow by 14 per cent during the same period. Risk factors associated with social isolation among seniors include age over 75, low income, living alone, health or mobility difficulties, and language or cultural barriers. Currently, 26 per cent of Calgary seniors live alone and almost 40 per cent of unattached Calgary seniors live in poverty.[1]

Goal: To promote social connections and reduce social isolation among seniors by providing programs and services that are accessible, affordable, and account for health, mobility and cultural considerations. Seniors programs are intended to promote and enable physical, mental, and social engagement within the community.

Strategy: Social connectedness is associated with better physical and mental health, quality of life, and longer life.[2] Seniors centres across the city offer social, educational, recreational, and leisure programs and activities for seniors aged 65 and older. Programs are coordinated by trained staff and, where possible, are designed with local seniors to respond to preferences for social and community engagement and supports; provide physical activity and recreation for seniors of diverse interests and abilities; and create an inviting and inclusive space for connecting to important community supports for seniors. Programming is ongoing and flexible to respond to needs and interests as they are identified. Centres are open year-round on weekdays, as well as some Saturdays and some evenings to host monthly or bi-weekly socials or special events.

Rationale: Social isolation in the seniors' population can be prevented and reduced by enhancing protective factors such as social ties (including with younger friends and neighbours), good health, creative expression, and communication skills. Community engagement can be facilitated with accessible services, access to transportation, and opportunities to take up meaningful roles in society.[3] Programs that capitalize on seniors' experiential knowledge and affirm and enable opportunities for reciprocity, feeling valued, and making meaningful contributions contain the psychological preconditions for building social ties. Best practices include group programs with an educational or training component, intergenerational programs, gatekeeper programs, volunteer opportunities and targeted social or support activities, which can be tailored to participant health and activity limitations.[4] Programs should be facilitated by quality trained staff and enable participant involvement in program design, implementation, and review.[5]

Indicators:
4 – Positive Social Ties and/or Bonding Social Capital
6 – Social Inclusion – Social Participation

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[1] The City of Calgary, Calgary & Region Economic Outlook, Spring, 2018.

[2] Austin, C., R. McClelland, J. Sieppert, and E. Perrault. n.d. The Elder Friendly Communities Project: Understanding Community Development and Service Coordination to Enhance Seniors' Quality of Life. Calgary: University of Calgary, Faculty of Social Work. Page 20.

[3] Edwards, P. and A. Mawani. 2006. Healthy Aging in Canada: A New Vision, A Vital Investment From Evidence to Action. Ottawa: Federal/Provincial/Territorial Committee of Officials (Seniors), Healthy Aging and Wellness Working Group. Pages 17-18.

[4] Cooper, Merrill. 2009. "Vulnerable Seniors." Outcome: Positive Social Ties and Vulnerable Populations. FCSS Calgary Research Brief No. 4. Calgary: City of Calgary, FCSS Calgary. Pages 12-15.

[5] Cattan, M., M. White, J. Bond, and A. Learmouth. 2005. "Preventing Social Isolation and Loneliness among Older People: A Systematic Review of Health Promotion Interventions." Ageing and Society 25: 41-67. Pages 57, 61.

PARKDALE NIFTY FIFTIES SENIORS ASSOCIATION

- **Seniors Programs**

THEORY OF CHANGE:

Need: In 2017, 11 per cent of Calgary's population was aged 65 or older, with a 23 per cent population increase projected to occur by 2022. The population aged 75 or older is expected to grow by 14 per cent during the same period. Risk factors associated with social isolation among seniors include age over 75, low income, living alone, health or mobility difficulties, and language or cultural barriers. Currently, 26 per cent of Calgary seniors live alone and almost 40 per cent of unattached Calgary seniors live in poverty.[1]

Goal: To promote social connections and reduce social isolation among seniors by providing programs and services that are accessible, affordable, and account for health, mobility and cultural considerations. Seniors programs are intended to promote and enable physical, mental, and social engagement within the community.

Strategy: Social connectedness is associated with better physical and mental health, quality of life, and longer life.[2] Seniors centres across the city offer social, educational, recreational, and leisure programs and activities for seniors aged 65 and older. Programs are coordinated by trained staff and, where possible, are designed with local seniors to respond to preferences for social and community engagement and supports; provide physical activity and recreation for seniors of diverse interests and abilities; and create an inviting and inclusive space for connecting to important community supports for seniors. Programming is ongoing and flexible to respond to needs and interests as they are identified. Centres are open year-round on weekdays, as well as some Saturdays and some evenings to host monthly or bi-weekly socials or special events.

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Indicators:
4 – Positive Social Ties and/or Bonding Social Capital
6 – Social Inclusion – Social Participation

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[1] The City of Calgary, Calgary & Region Economic Outlook, Spring, 2018.

[2] Austin, C., R. McClelland, J. Sieppert, and E. Perrault. n.d. The Elder Friendly Communities Project: Understanding Community Development and Service Coordination to Enhance Seniors' Quality of Life. Calgary: University of Calgary, Faculty of Social Work. Page 20.

[3] Edwards, P. and A. Mawani. 2006. Healthy Aging in Canada: A New Vision, A Vital Investment From Evidence to Action. Ottawa: Federal/Provincial/Territorial Committee of Officials (Seniors), Healthy Aging and Wellness Working Group. Pages 17-18.

[4] Cooper, Merrill. 2009. "Vulnerable Seniors." Outcome: Positive Social Ties and Vulnerable Populations. FCSS Calgary Research Brief No. 4. Calgary: City of Calgary, FCSS Calgary. Pages 12-15.

[5] Cattan, M., M. White, J. Bond, and A. Learmouth. 2005. "Preventing Social Isolation and Loneliness among Older People: A Systematic Review of Health Promotion Interventions." Ageing and Society 25: 41-67. Pages 57, 61.

RENFREW EDUCATIONAL SERVICES SOCIETY

- **Renfrew Family Support**

THEORY OF CHANGE:

Need: Close to a quarter of families with children with special needs experience marital/familial conflict; 70% - 80% of parents report having ongoing physical, emotional or mental health responses such as depression, anxiety or fatigue[1] [2]. Having a child with special needs impacts on a family's ability to work; 39% - 72% report working reduced hours, bypassing promotions, or giving up work altogether; the resultant financial problems are a burden for the entire family[1] [2]. Key areas of need for families of children with special needs are: timely and accurate information, material resources, social support, respite, coping skills and strategies, service co-ordination and culturally-meaningful interventions for families from diverse groups[1] [2] [3] [4] [5] [6] [7] [8].

Goal: Families feel hopeful and optimistic about their families' future and empowered to meet the needs of their family and their child(ren), participate in their social and community networks, and are able to receive and understand all Renfrew services, and corresponding information, without any language-related barriers preventing this.

Strategy: Change strategies take place during a school year and can encompass anywhere from one to nine program cycles with frequency and intensity individualized. Families can self-refer, or be referred by staff, once engaged, Renfrew Family Support (RFS) assesses the needs and determines the best interventive modality for the presenting situation. This can include providing information, referral to community resources; ensuring basic needs are met; developing social connection and peer support options for families; and facilitating parenting, information and/or social groups for families. RFS operates within a multi-disciplinary context and so change strategies may be implemented in consort with other disciplines` therapeutic interventions. RFS provides information sessions to community agencies as part of partnership arrangements to build awareness and help develop collaborative service delivery options. Providing support might encompass one discussion of half an hour, or several meetings of an hour to 3 hours each. Parenting, information and/or social groups are typically 2 hours in duration, and approximately 25 groups are held every program cycle.

Rationale: These intervention strategies help families to stabilize their instrumental needs, enhance their coping and resilience skills, establish core social supports and increase social inclusion. Research emphasizes the need for strong social ties and supports for individuals to participate fully in our society. A multi-layered and regular system of attaining feedback provides ongoing checkpoints for verifying the validity, or need for revision of, of the implemented change strategies.

Indicator:
#4 – Positive Social Ties and/or Bonding Social Capital

[1] Contact a Family (December, 2011). Forgotten families: The impact of isolation on families with disabled children across the U.K. (London, England).

[2] Hanvey, L. (2002). Children with disabilities and their families in Canada: A discussion paper. (National Children's Alliance for the First National Roundtable on Children and Disabilities).

[3] Hall, H.R., & Graff, J. (2011). The relationships among adaptive behaviors of children with autism, family support, parenting stress, and coping. Issues in Comprehensive Pediatric Nursing, 34(1), 4-25.

[4] Hanvey, L. (2002). Children with disabilities and their families in Canada: A discussion paper. (National Children's Alliance for the First National Roundtable on Children and Disabilities).

[5] Looman, W.S., O'Connor-Von, S.K., Ferski, G.J., & Hildenbrand, D.A. (March-April, 2009). Financial and employment problems in families of children with special health care needs: Implications for research and practice. Journal of Pediatric Health Care, 23(2), 117-125.

[6] Temple, B., Curtis, C., & Farr, C. (2015). Evidence briefing on respite services for people with intellectual or developmental disability. Winnipeg, MB: Manitoba Centre for Nursing and Health Research.

[7] Cooper, M. (2014). "The issue /Social isolation/Parent/Parent education/training programs/Strengthening social supports". Positive parenting and family functioning. FCSS Research Brief 2. Calgary: City of Calgary, FCSS Calgary. Pages 1-2, 8, 12-14.

[8] Cooper, M. (2014). "The issue & Vulnerable families". Positive social ties and vulnerable populations. FCSS Calgary Research Brief 4. Calgary: City of Calgary, FCSS Calgary. Pages 1-2, 6.

SAGESSE DOMESTIC VIOLENCE PREVENTION SOCIETY
- **Peer Support Volunteer Program**

THEORY OF CHANGE:

Need: Statistics Canada estimates that domestic abuse accounted for at least 26% of police reported violence crimes in 2019[1]. Calgary Police Service report that between 400-500 people called per month to report a domestic abuse situation, which amounted to over 15,000 domestic abuse calls during 2020[2]. The actual number of individuals experiencing domestic abuse is most likely much higher as only 1 in 5 victims of abuse reported them to police[3]. Social isolation has been identified as a risk factor for domestic abuse and violent partners often use isolation as a medium of control over the victim[4]. Further, experiencing an abusive relationship often changes a woman's sense of self and affects her confidence, self-esteem, and motivation to seek social support[5].   Women who have experienced domestic abuse need opportunities to rebuild positive social relationships in order to escape the isolating effects of the trauma and abuse they have experienced and feel empowered to move on with their lives[6]. Building strong, healthy, resilient communities requires engaged and diverse volunteers and citizens who can identify and grow community assets[7].

Goal: To empower individuals to experience benefits of volunteering in their community to address domestic abuse, increasing their social participation and inclusion.

Strategy: The volunteer program supports women who have lived experience of domestic abuse from diverse socio-economic and ethno-culturally communities to engage in programming and support for women who are currently experiencing or impacted by domestic abuse. Peer Support Volunteers go through an extensive onboarding before supporting program delivery, including interview, reference checks, 28-36 hours of capacity building training and ongoing support and supervision from agency staff. Volunteers are encouraged to support clients and each other to engage in social inclusion activities by drawing upon their personal experiences of domestic abuse and trauma. Trained volunteers engage with Sagesse on average for over two years with contact ranging from once a week to once a month depending on the role of the volunteer.

Rationale: Peer Support Volunteers are also provided with an opportunity for individuals to share their current knowledge and experience while also developing new skills[8]. Volunteers engaged in community programs experience benefits such as increased knowledge of community resources, a wider network of support, increased self-confidence and civic engagement, decreased social isolation, and pride in contribution to the community[9]. Volunteers engaged in community are better able to provide support and increase social inclusion if they have been provided with opportunities to build their confidence and skills[10].

Indicators:
6 – Social Inclusion – Social Participation

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[1] Conroy, Shana. Family violence in Canada: A statistical profile, 2019
[2] Calgary Police Service 4th Quarter 2020 Statistical Report
[3] Juristat Article – Family violence in Canada: A statistical profile, 2014
[4] Wells et al. 2013. "A context of domestic violence: Learnings for prevention from the Calgary Filipino community". International Journal of Child, Youth and Family Studies. 1: 147-165.
[5] Lynch, S. 2013. "Not Good Enough and On a Tether: Exploring How Violent Relationships Impact Women's Sense of Self" Psychodynamic Psychology 41: 219-246.
[6] Goodman, L. A., & Smyth, K. F. 2011. "A call for a social network-oriented approach to services for survivors of intimate partner violence". Psychology of Violence 1(2) Page 79.
[7] Speevak Sladowski, P., et al. 2013. "Volunteering: A catalyst for citizen engagement, social inclusion, and resilient communities". The Philanthropist 25(1) 37-44.
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[10] Pajot, M. 2009. "Evaluation of neighbours, friends, and families" Centre for Research and Education on Violence Against Women and Children.

SONSHINE SOCIETY OF CHRISTIAN COMMUNITY SERVICES
- **Sonshine Children's Centre**

THEORY OF CHANGE:

Need: Sonshine's Children's Centre programming focuses on stopping the cycle of domestic violence and victimization by addressing the impact of trauma in children and building parenting capacity . Children who have witnessed or have been victims of domestic violence often grow up to repeat the cycle either as abusers or victims[1]. The parents who were victims in their childhood often have diminished parenting capacity and are unable to form a loving, secure relationship with their children. A secure relationship with a caring, engaged caregiver can mitigate many of the effects of trauma caused by violence and neglect[2]. Theraplay encourages nurturing and balanced structure in the child/parent dyad, resulting in a loving, secure, empathetic relationship.

Goal: To facilitate the development of securely attached and attuned parent/child relationships, increase parenting capacity, support children's developmental milestone acquisition, create healthy functioning within family and community systems, increase protective factors and decrease risk factors in order to ameliorate the effects of domestic violence, toxic stress and trauma.

Strategy: To break down the barrier of accessibility, the program is offered on-site and at no-cost to parents residing in Sonshine Centre with children either enrolled or not enrolled in Sonshine Children's Centre and parents with children enrolled in the Children's Centre who were referred from our community partners. The Parent Child Educator (PCE) and Child and Youth Counsellor (CYC) work with the children and their parents/caregivers in building parenting capacity and to develop and/or strengthen a secure attachment between parent and child. Using the Marschak Interaction Method (MIM), the PCE and CYC, in partnership with the parent/caregiver to determine the varied parenting presenting issues and to create a customized program based on Theraplay methods. All Theraplay sessions aim to create an interactive and attuned emotional connection of love, trust, belonging, joy and safety between the child and parent or caregiver both during and after each session. The frequency and intensity of the intervention is based upon the unique needs of each family system. The CYC and PCE oversee additional parenting supports through a variety of modalities such as one-on-one coaching, groups, counselling and community partnership referrals.

Rationale: Domestic violence has a profound impact on the brain development of young children[3]. Parenting is also impacted: traumatized mothers report lower parenting effectiveness and more insecure attachment to their children[4]. The bond parents establish with their children provides the "active ingredient" for how children develop emotionally and cognitively. Through Theraplay - an attachment based play-oriented therapy - engagement, nurturing and balanced structure between a parent and child are encouraged, resulting in a loving, secure, empathetic relationship[5].

Indicators:
20 – Parenting – Parent Questions

[1] UNICEF, 2006. "Behind Closed Doors." Page 3

[2] Dobson, C. & Perry, B., 2010. "The Role of Healthy Relational Interactions in Buffering the Impact of Childhood Trauma." In Working with Children to Heal Interpersonal Trauma: The Power of Play. 2010, Guilford Press. Page 27

[3] Bruce D. Perry, 2014 "Helping Traumatized Children." The Child Trauma Academy. Page 2

[4] Alytia A. Levendosky, Alissa C. Huth-Bocks, Deborah L. Shapiro, and Michael A. Semel, 2003 "The Impact of Domestic Violence on the Maternal-Child Relationship and Preschool age children Functioning." Journal of Family Psychology Copyright 2003 by the American Psychological Association, Inc. 2003, Vol. 17, No. 3, 275–287

[5] Bennett, Lorna R, Shiner, Susan K., and Sheila Ryan 2006 "Using Theraplay in shelter settings with mothers and children who have experienced violence in the home." Journal of Psychosocial Nursing and Mental Health Service, 44(10). Page 38-47

SUNRISE HEALING LODGE SOCIETY

- **Cultural Initiative for Healing**

THEORY OF CHANGE:

Need: The intergenerational impact of the residential school experience has left many Indigenous people, in particular, men, feeling alienated from their communities and culture. The intergenerational impacts of colonialism include poverty, homelessness, & addiction. The colonial legacy left behind is for men to be silent in their need for support and help. Indigenous men require safe spaces and settings to share their emotions with others who have the same collective experience.[1]

Goal: To increase a sense of cultural inclusion among vulnerable marginalized Indigenous men, with an added component focusing on the invitation for men to become active participants in fathering and leadership in our community. This invitation is presented through the participation of cultural education & traditional healing practices such as smudging, sweat lodges, pipe ceremonies, face painting and teaching cultural roles of men and boys.

Strategy: To gain a sense of cultural inclusion belonging, men require involvement within a like-experienced group. Today, men's gender roles do not look the same as they did in past traditional settings. Through colonialism and modernization, indigenous men no longer play a vital role as warrior, provider and protector. This confusion and lack of purpose creates self-esteem issues that manifest into many kinds of personal, family and societal issues. Men in this program are challenged to push their limits which then become the experiential fuel to persevere through future life challenges. These men are assisted to carve out new ideas of manhood and bring healing to future generations of men in their family. Participants come to understand that they are not alone in their confusion and conversely, their positive experiential journey towards healing.[2] The Cultural Lead will work closely with our Indigenous male clients in reclaiming their historical roles through individual cultural sessions over a nine week span with six cycles a year. In addition, once a year male participants are taken off campus to a rural setting to experience personal healing through traditional teachings and ceremony. It is this program's believe that every step a man takes towards his own healing, he takes one step closer to being an effective father.

Rationale: The spiritual experience and the positive representations of Indigenous people is one of the many strengths of the Cultural Initiative for Healing program. Through cultural gatherings within the treatment center, spiritual experience opportunities, and Elder interaction, our male inpatient and outpatient clients experience, perhaps for the first time - a sense of belonging. These men have the opportunity to heal in a safe environment. Reclaiming spiritual teachings and practices is an important counterpoint to the shame-based identity fostered in Indigenous children by residential schooling and is a way of building healthy relationships and reducing social isolation. The role of traditional people, counsellors and Elders is to help men in the program find their own path to restoring balance by reawakening their connection to the sacred. The Cultural Initiative Program posits that healing work is considered sacred work. Healing is viewed as a three-pronged process, known as the Three Pillars of Healing: reclaiming history, cultural interventions and therapeutic healing.[3] This can rebuild self-esteem and positive Indigenous identity, build a stronger foundation for healing, and offer a sense of belonging.

Indicators:
48 – Cultural Role Modelling and Mentoring
49 - Historical Indigenous Knowledge

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[1] Spirit Magazine: Sharing First Nations Health & Wellness. The Men's Issue
[2] Fatherhood is Forever: A resource booklet about fathering for First Nations and Metis parents in B.C., 2013
[3] Pinnow, Joanne. 2013. FCSS Aboriginal Brief. Calgary: Family & Community Support Services, the City of Calgary. Page 17-48.

SUNRISE HEALING LODGE SOCIETY
- **Family Counselling Program**

THEORY OF CHANGE:

Need: The intergenerational impact of the residential school experience has left some families without strong role models for parenting. Culturally appropriate programs provided in Indigenous communities have the potential to improve parenting skills and enable more children to grow up safely in their own families and communities.[1] The intergenerational impacts of residential school are apparent in urban Indigenous families who suffer poverty, homelessness, and other social and economic hardships.

Goal: To support individual life skills training and development so vulnerable Indigenous families can make positive lifestyle choices for their future through education, counselling, and community support.

Strategy: The Family Counselling Program is a holistic Indigenous-based program for Indigenous and non-Indigenous outpatient parents in Calgary. Program components are designed to decrease family isolation, increase family cohesion, and improve parenting skills by providing culturally based and culturally appropriate activities and counselling. Group counselling sessions run three times per week for six weeks with eight sessions offered per year for an approximate total of 80 participants. Intervention strategies include psycho-educational groups for about ten participants that are based on the Three Pillars of Healing, which includes reclaiming history, cultural interventions, and therapeutic healing. In addition, the families are engaged in positive activities to strengthen family bonds through the use of traditional cultural ceremonies, customs and practices. These take place once or twice during each session.

Rationale: Spiritual teachings and practices are an important counterpoint to the shame-based identity fostered in Indigenous children by residential schooling and a way of building healthy relationships and reducing social isolation.[2] In promising healing practices for parenting programs and for programming for Aboriginal families, healing is posited as a three-pronged process, known as the Three Pillars of Healing.[3] For a curriculum to be effective in training First Nations, Métis, Inuit, and other Indigenous people, research indicates that it must ensure cultural relevance for the people who are involved. Researchers have defined Indigenous learners as being holistic, observational, and experiential learners who prefer to work together in groups.[4] Strengthening families and supporting positive parenting are effective means of preventing the intergenerational cycle of poverty and social exclusion.[5] For low-income, isolated families, quality support systems can improve positive parenting skills, family functioning and child outcomes.[6]

Indicators:
49 – Historical Indigenous Knowledge
50 – Sense of Cultural Belonging and Feeling Support

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[1] Truth and Reconciliation Commission of Canada. 2015. Honouring the Truth, Reconciling for the Future: Summary of the Final Report of the Truth and Reconciliation Commission of Canada. Winnipeg: Truth and Reconciliation Commission of Canada. Page 191

[2] Deborah Chansonneuve. 2007. Addictive Behaviours Among Aboriginal People in Canada. Ottawa: Aboriginal Healing Foundation. Page 37.
Archibald, Linda. 2006. Final Report of the Aboriginal Healing Foundation, Volume III: Promising Healing Practices in Aboriginal Communities. Ottawa: Aboriginal Healing Foundation. Page 16.

[3] Archibald, Linda. 2006. Final Report of the Aboriginal Healing Foundation, Volume III: Promising Healing Practices in Aboriginal Communities. Ottawa: Aboriginal Healing Foundation. Page 16.

[4] BC Aboriginal Child Care Society. 2010. Bringing Tradition Home: Aboriginal Parenting in Today's World. Facilitator's Guide. West Vancouver: BC Aboriginal Child Care Society. Page 14.

[5] Cooper, Merrill. 2014. "Parent education/training programs." Positive parenting and family functioning. FCSS Calgary Research Brief 2. Calgary: City of Calgary, FCSS Calgary. Page 12.

[6] Cooper, Merrill. 2014. "Social isolation." Positive parenting and family functioning. FCSS Calgary Research Brief 2. Calgary: City of Calgary, FCSS Calgary. Page 8.

TRELLIS SOCIETY FOR COMMUNITY IMPACT
- **Building Youth Connections**

THEORY OF CHANGE:

Need: Alberta has the fourth highest number of newcomer youth in the country. In 2011 there were 66,615 immigrant youth aged 15 to 24 years living in Calgary.[1] Studies show that there are significant settlement challenges for newcomer youth. They have a limited time to learn English, to adapt to a new culture, to catch up academically to Canadian-born students, and to develop the skills necessary to seek employment. Consequently, they are vulnerable to social isolation, poverty, depression and anxiety, dropping out of high school, unemployment, and long-term challenges to integration.[2] Multi-barriered newcomer youth need information and access to services, social and emotional support, employment support, and opportunities for cultural bridging so that they can develop the confidence, self-esteem, positive sense of identity, skills, resources and social capital necessary for them to become healthy, integrated self-sufficient adults.

Goal: To support newcomer youth to become healthy, integrated and self-sufficient adults by equipping them to meet their personal, social, community, educational and employment goals.

Strategy: BYC supports youth ages 12-24 with an immigrant and refugee youth focus. Services are offered up to seven days a week throughout the year during critical afterschool hours, holidays, and weekends. BYC addresses the developmental and settlement needs of newcomer youth through a comprehensive and culturally competent service model that includes: needs assessment, referrals, community connections, advocacy and support for system navigation; one to one case management with ongoing supportive coaching; satellite workshops with age appropriate cultural orientation topics; employment related services including employment skills workshops and connection to employment opportunities; cultural and recreation activities with positive adults and peers that promote community connections and building social networks; family events that promote family togetherness and celebration of cultural diversity; and community collaboration to reduce barriers and increase access to a wider range of community supports and resources.

Rationale: Research recommends that programs for newcomer youth focus on short-term settlement needs including cultural orientation, language acquisition, education, employment, cultural identity, recreation and social support networks.[3] Effective programs that work with newcomer youth use approaches taken from both the settlement services sector and from mainstream youth programming. BYC uses a community-based outreach model that is grounded in the philosophy of positive youth development with an emphasis on approaches for working with newcomer youth that are holistic, relational, culturally competent, strength-based, empowerment-focused and trauma-informed.[4]

Indicators:
38 – Youth – Grades 7 to 12 Self-Esteem, Self-Confidence, Identity

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[1] Statistics Canada. (2013). National Household Survey Profile for Calgary, CY. 2011 National Household Survey. Statistics Canada Catalogue no. 99-004-XWE.

[2] Anise, P. and Kilbride, K. M. (2003). The Needs of Newcomer Youth and Emerging Best Practices to Meet Those Needs. Paper for Joint Centre of Excellence for Research on Immigration and Settlement-Toronto.

[3] Berry, J.W., Phinney, J., Sam, D.L., et al. (2006). Immigrant youth: Acculturation, identity, and adaptation. Applied Psychology International Review. 55(3): 303-32.

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TRELLIS SOCIETY FOR COMMUNITY IMPACT
- **CAS, Community Clubs**

THEORY OF CHANGE:

Need: Over one in six Albertan children live in poverty[1]. Poverty affects long-term health, educational achievement, employment, social and recreational opportunities, access to supportive caring adults for children, and a greater likelihood to engage in substance abuse and criminal activity.[2] Each year spent in poverty reduces by two percentage points a child's chance of graduating from high school.[3] Children in low-income households are also three times more likely to have mental health problems due to a lack of routines, instability, parental stress and inadequate parenting.[4] Without opportunities to develop positive relationships with caring adults, engage in pro-social recreation activities, and build skills and competencies, children from low-income families will lag behind their more affluent peers and be at increased risk for negative outcomes in adulthood.

Goal: Our Clubs work to decrease risk factors and increase protective factors by promoting physical and mental well-being, positive relationships, and social and emotional competencies that will increase resiliency, optimal development and the wellbeing of young people.

Strategy: Clubs provide affordable, accessible and quality programs to young people ages 6-18 within targeted communities throughout the year during the critical out of school time hours. Programs are registered, run between 6-11 weeks, and last for 1.5 to 3 hours in length, with the goal of providing 120 hours of programming per member over the year. Members participate in a wide variety of programming in five core areas: Learning & Discovery, Health & Wellbeing, Leadership Development, Positive Community Connections and Family Support. Programming is designed using Sequenced, Active, Focused, and Explicit (SAFE) principles and STEP, an evidence-based SEL curriculum, to explicitly teach social and emotional competencies in seven key areas: empathy, emotional regulation, emotion recognition, problem solving, impulse control, communication, and assertiveness. There is a nominal fee for this program however subsidies are available so that cost is never a barrier to participation.

Rationale: Participation in afterschool programs increases engagement in school, improves academic performance, social skills and behaviour, and reduces the likelihood that children will become involved in risky behaviour.[5] According to CASEL, SEL programming goes from preschool through high school. Young people with stronger social and emotional skills are more likely to graduate from high school and have stable, full-time employment while being less likely to commit crimes, be on social assistance, have substance use problems and mental health issues.[6] SEL is not a cure for mental illness, but it can be a universal mental health promotion strategy. Our services are grounded in the theories of resilience and positive youth development with an emphasis on approaches that are holistic, relational, youth-centered, developmentally appropriate, trauma-informed, culturally competent and strengths-based.

Indicators:
34 – Children – Grades 4-6 – Self-Esteem, Self-Confidence, Optimism
38 – Youth – Grades 7-12 – Self-Esteem, Self-Confidence, Identity

Calgary
AfterSchool

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[1] Alberta Government. (2013). Together We Raise Tomorrow. Alberta's Poverty Reduction Strategy, Discussion Paper.
[2] Cooper, K., & Stewart, K. (2013). Does Money Affect Children's Outcomes? A Systematic Review. Joseph Rowntree Foundation.
[3] Grayson, R. (N.D.). At-risk Youth & Resilience Factors. Accessed from www.visionrealization.com
[4] Whitebread, D. (2012). The importance of play: A report on the value of children's play with a series of policy recommendations. University of Cambridge and Toy Industries of Europe.
[5] Afterschool Alliance. (February 2014). Taking a Deeper Dive into Afterschool: Positive Outcomes and Promising Practices. Washington, DC: Afterschool Alliance.
[6] J.A., and R.P. Weissberg. 2007. The Impact of after-school programs that promote personal and social skills. Chicago, IL: Collaborative for Academic, Social, and Emotional Learning.

TRELLIS SOCIETY FOR COMMUNITY IMPACT

- **CAS, Youth Matters**

THEORY OF CHANGE:

Need: In 2014, 22 per cent of Calgary youth aged 12 to 19 did not have a strong sense of community-belonging and rated their mental health as less than 'very good.'[1] In comparison to the provincial average, Calgary youth fare better in mental health but poorer when it comes to their sense of belonging to the local community. Social relationships, both quantity and quality, affect mental health, health behaviour, physical health, and mortality risk.[2]

Goal: To enhance identity, self-confidence, sense of belonging, social skills, and connection for vulnerable youth in Calgary.

Strategy: The program focuses on increasing the positive development of youth through organized, structured, and supervised after-school activities. It supports youth in achieving identified goals through advocacy, teaching, modelling, and connecting. The program provides one-on-one support, age appropriate skill-based groups, and opportunities for youth to connect with each other, adults, resources, and their community. Aspen's Headspace Bus also serves as a mobile after-school hub to help youth overcome transportation barriers, lack of infrastructure for programming, and combat social isolation. The program uses SAFE principles by aligning activities with identified goals (sequenced); using active forms of learning and feedback mechanisms to engage participants in conversations about their learning experience (active); engaging in activities and support to enhance social competency and skills enhancement (focused); and using asset-based processes to enhance social and personal skills (explicit). Youth Matters offers flexible individual and group-based activities appropriate to the needs of participants. The program runs for two hours once a week for eight to 12 weeks, and is offered three times per year.

Rationale: Structured and intentional programming, guided by trauma-informed practice[3], with sufficient doses of participation, may have benefits for youth participating in after-school programs.[2] By integrating social and emotional learning components into programming, youth increase their sense of belonging, social connection and self-concept or identity.[4] Long-term, structured, and progressive programs help children and youth build strong peer groups; learn a wide range of skills, as well as personal and practical competencies; gain reliable and predicable relationships with positive adult role models; and create a sense of accomplishment and self-worth.

Indicators:
38 – Youth – Grades 7-12 – Self-Esteem, Self-Confidence, Identity

Calgary
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[1] Statistics Canada. 2015. "Health indicator profile, annual estimates, by age group and sex, Canada, provinces, territories, health regions (2013 boundaries) and peer groups." Canadian Community Health Survey. CANSIM Table 105-0501. Ottawa: Statistics Canada. Website. http://www5.statcan.gc.ca/cansim/a26?lang=eng&id=1050501.

[2] Cooper, Merrill. 2014. "After-school programs." Positive child and youth development. FCSS Calgary Research Brief 1. Calgary: City of Calgary, FCSS Calgary. Page 7.

[3] Blue Knot (2015). Best practice guidelines for working with adults surviving child abuse. Retrieved from https://www.blueknot.org.au/Workers-Practitioners/For-Health-Professionals/Resources-for-Health-Professionals/Best-Practice-Guidelines

h Livelihoods Development Program Guide. Washington: United States Agency for International Development. Page 17.

[4] WCSD & CASEL (2016). Assessing to Serve Students: A Progress Report on WCSD & CASEL's Research Practitioner Grant. Retrieved from http://casel.org/wp-content/uploads/2016/06/Assessing-to-Serve.pdf

TRELLIS SOCIETY FOR COMMUNITY IMPACT
- **Community Connections - Outreach**

THEORY OF CHANGE:

Need: Approximately 111,150 individuals lived below the low-income cut-off (after tax) in 2016 in Calgary.[1] In 2015, Alberta ranked second in relative vulnerability of households around debt-to-income in Canada.[2]

Goal: To support vulnerable families and individuals to increase their economic self-sufficiency and housing stability.

Strategy: The program focuses on supporting families and individuals to achieve stability and sustainability within their community and enhance their overall well-being. This is done through supporting participants to achieve their identified goals in a group-based setting or through individualized support. Using the Sustainable Livelihoods framework, staff help participants enhance their assets and capacities to increase income, reduce expenses, improve financial literacy, achieve housing stability, access community resources, connect with and apply to educational institutions, and build social connections. The program works collaboratively with multiple community agencies and programs to enhance the continuum of supports provided. Included in this is Aspen's Home Stay Prevention program, allowing participants who have attained stable housing and now have the capacity to work on long-term goals, to work with the program in order to achieve them. Community Connections' staff meet with client's once every one to two weeks for one to two hours per visit for up to six months depending on the client's needs. Staff meet with clients in their homes or within the community and the complexity of the client's situation determines the frequency and duration of support.

Rationale: Lack of income and financial support are leading causes of poverty of many Calgarians[3] and increasing economic capacity prevents families and individuals from experiencing poverty and social exclusion[4]. Guided by the Sustainable Livelihoods framework[5] and Trauma Informed Care practices[6], staff integrate social and emotional components that create feelings of safety, control and empowerment. Research suggests a positive relationship between higher income and participation in community and housing also plays a key role in creating economic and social well-being. [7]

Indicators:
#15 – Long -Term Decreased expenses; Increased Income from Sources other than Employment

[1] Statistics Canada. 2017. *Calgary [Census metropolitan area], Alberta and Saskatchewan [Province]* (table). *Census Profile.* 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released November 29, 2017. https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E (accessed August 13, 2018)
[2] TD Economics. 2015. Special Report: November 9, 2015. Toronto: TD Bank Group. Page 10
[3] United Way Calgary and Area, City of Calgary, and Vibrant Communities Calgary. 2012. Why does poverty exist? Poverty in Calgary – A Four Part Series, Part 2. Calgary: United Way and Area, City of Calgary, and Vibrant Communities Calgary. Page 4
[4] Cooper, Merrill. 2009. "The Issue." Outcome: Adult personal capacity and individual and family economic self-sufficiency. FCSS Calgary Research Brief No. 3. Calgary: City of Calgary, FCSS Calgary. Page 1
[5] Murray, J., and M. Ferguson. 2002. Women in transition out of poverty: A guide to effective practice in promoting sustainable livelihoods through enterprise development. Toronto: Canadian Women's Foundation. Pages 13-14
[6] Blue Knot (2015). Best practice guidelines for working with adults surviving child abuse. Retrieved from https://www.blueknot.org.au/Workers-Practitioners/For-Health-Professionals/Resources-for-Health-Professionals/Best-Practice-Guidelines
[7] Copas, J., and L. Copas. 2005. Housing Stability Indicators and Impacts. Ottawa: Canada Mortgage and Housing Corporation. Page I.

TRELLIS SOCIETY FOR COMMUNITY IMPACT

- **HERA**

THEORY OF CHANGE:

Need: In 2018/19, 168 Alberta children were served through the Protection of Sexually Exploited Children Act (PSECA).[1] Although all children are at risk of exploitation, some are at greater risk due to certain factors including being homeless, having system-involvement, being LGBTQ2S+ or Indigenous, and having adverse experiences in childhood. Sexually exploited youth face significant health and life challenges resulting from exploitation and the traumatization they experience. Without intervention, many of these girls end up in a life-long cycle of abuse, addiction, homelessness, crime and chronic health conditions.

Goal: Hera provides therapeutic, client-directed services which help ensure that girls are not only removed from exploitive situations but have the resources for long term sustainable recovery and building healthy, functional adult lives.

Strategy: Hera is a year-round voluntary program for girls aged 13-17 who are at risk of or are currently being sexually exploited. Calgary Board of Education provides a specialized classroom for girls to re-engage with their education. BGCC provides a menu of intensive services that address key life areas such as healthy relationships, mental health and recovery from trauma, physical health, family reconnection, parental self-efficacy, employment, and housing. Girls stay in the program for up to two semesters with ongoing outreach services after girls' transition back to community school settings to ensure stability is maintained. Parents are provided intensive case management, psychoeducation and social support to build family resilience and capacity to support their sexually exploited daughters.

Rationale: Hera's program model is designed to meet the specific recovery needs of sexually exploited girls who face very different recovery issues than other types of abuse victims. Services are grounded in the theories of attachment, trauma, positive youth development and resilience with an emphasis on approaches that are relational, developmentally appropriate, culturally competent and strengths-based. Without sufficient support for recovery from traumatic experiences, these girls will face difficulties regaining control over their lives and re-integrating into society.[2] Hera uses the ARC Framework, an evidence-based trauma-informed intervention model, to help girls build capacity in core domains (attachment, self-regulation, and competency) which are frequently impacted by trauma. Building capacity in these areas supports recovery and future resiliency. Bruce Perry's research reveals healthy relationships and a strong network are powerful protective and rehabilitative factors.[3] Hera's work with families focuses on the re-establishment of trust, consistency and communication to increase family functioning.

Indicators:
#19 – Family Cohesion – Parent / Adult Questions
#38 – Youth – Grades 7-12 Self Esteem, Self-Confidence, Identity

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[1] Government of Alberta. Child Intervention Information and Statistics Summary 2019/20 First Quarter (June) Update.
[2] Basson, D., Rosenblatt, E., & Haley, H. (2012). Research-to-Action: Sexually Exploited Minors Needs and Strengths. WestCoast Children's Clinic.
[3] Perry, Bruce. 2009. Understanding the Effects of Maltreatment on Brain Development. Washington, DC: Child Welfare Information Gateway.

TRELLIS SOCIETY FOR COMMUNITY IMPACT
- **Iiyika'kimaat Youth Program**

THEORY OF CHANGE:

Need: The impact of hundreds of years of policies, actions and practices against Indigenous communities has left intergenerational trauma and negative residual outcomes. This has resulted in Indigenous people being overrepresented in sorrow systems, disconnected from their culture and impacting their sense of identity. We can help restore connections back to the community, traditional and cultural practices and support essential healing for youth to become healthy, well and thrive. For Indigenous programming to be effective, the root causes of intergenerational trauma must be addressed. Intergenerational trauma is a complex form of post-traumatic stress disorder resulting from the impact of the residential school system. Addressing it requires three integrated actions: reclaiming history by learning about the experience and legacy of the Indian residential school system; cultural activities that build self-esteem and positive identity; and traditional healing, i.e., using traditional healing methods and Western approaches to support long-term healing for Indigenous youth and families. This can be achieved using a model based on Dr. Martin Brokenleg's "Circle of Courage," which integrates strong cultural components and family and extended family involvement[1].

Goal: To support long-term healing for Indigenous youth and families who experience social and cultural challenges resulting from intergenerational trauma.

Strategy: Utilizing traditional Indigenous approaches that integrate Western activities with cultural and spiritual practices, protocols and teachings are offered to Indigenous youth aged 12 to 21.With support of Elders and knoweldge keepers in program, outings and evaluation, the program is set up as a "healing journey" to mediate the impact of intergenerational trauma through strong cultural content and participation. A variety of cultural, recreational and informal mentorship opportunities are incorporated, providing a positive outlet for youth to explore their potential. There is no cost to participate. Youth are provided meals each program night and staff support youth with resource connections. Progam is offered four days a week from September to June. Activities are divided into four modules, each focusing on a specific theme from the "Circle of Courage." Cultural mechanisms integrated into programming provide a sense of identity, resiliency, self-esteem, coping skills, knowledge, and healing.

Rationale: The impact of intergenerational trauma and its link to the many challenges Indigenous families face today needs to be acknowledged. Restoring connections back to the community through traditional and cultural practices is essential in healing and helping Indigenous youth to become healthy.[2] The four principles in the "Circle of Courage" model for positive development—belonging, mastery, independence, and generosity—blend Indigenous philosophy on child and youth care with research and best practice from Western traditions. This integration is critical since intergenerational trauma is the result of colonization. Positive psychology and resiliency are closely tied with trauma and therefore is a focus of effective programming. Activities that build capacity, resiliency, self-motivation and healing are as important as teaching skills and knowledge.[3]

Indicators:
50 – Sense of Cultural Belonging and Feeling Supported
54 – Traditional Healing Practices for Individuals

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[1] Brendtro, L.K., M. Brokenleg, and S. van Bockern. 2014. "Environments Where Children Thrive: The Circle of Courage Model." Reclaiming Children and Youth 23(3): 10-15

[2] IRM Research & Evaluation, Inc. 2014. "FCSS Reporting Framework: Aboriginal Indicators (Phase II)." Calgary: City of Calgary, FCSS Calgary. Page 2.

[3] Brokenleg, M. 2012. "Transforming Cultural Trauma into Resilience." Reclaiming Children and Youth 21(3): 9-13.

TWO WHEEL VIEW – CALGARY LTD.
- **CAS, Earn-a-Bike**

Revised 2018 July 11

THEORY OF CHANGE:

Need: Children and youth moving through adolescence face complex physical, mental and social developmental challenges. Youth from marginalized communities often face additional challenges due to greater exposure to risk factors, as well as to societal, systemic and institutional barriers. [1] The more risk factors a youth experiences, such as low socioeconomic status, the greater likelihood they will experience problems including behavioural issues, emotional problems, hyperactivity, poor school performance and delinquency.[2]

Goal: To utilize the bicycle as a tool to build resiliency and social emotional learning in youth by providing high quality, free, Earn-a-Bike Programs. While acquiring bicycle mechanic skills, youth will develop and practice social and emotional competences such as emotion management, empathy and teamwork. Development of these competencies will lead to higher self-confidence and self-esteem in youth.

Strategy: The program runs once a week for 10 consecutive weeks, in diverse locations across Calgary with youth in grades 6-12. Facilitators are skilled bike mechanics and are trained in social emotional learning and trauma-informed practice. During the two-hour program, the "SAFE" model (Sequenced, Active, Focused, Explicit) is used to create an inclusive environment with group norms and expectations. This allows youth to feel safe enough to challenge themselves, share with others and make meaningful connections to peers and positive adult mentors. Opening and closing circles create routine and allow for the introduction of social and emotional learning (SEL) topics that are revisited regularly. Through experiential activities and hands-on bike mechanic lessons youth practice skills such as communication and teamwork. A "failure-friendly" and reflective environment allows youth to try new things and gain a sense of accomplishment. Activities include peer to peer sharing; adult role modeling; bike mechanics; healthy snacks and games/activities. The Earn-a-Bike program serves approximately 240 youth per school year.

Rationale: Research shows that positive youth development programming supports young people, so they are prepared to fully realize their potential and are resilient to challenges they may face.[3] Programs that focus on social and emotional learning (SEL) help build age appropriate competencies such as emotional wellbeing, attitudes toward self and others and academic performance. [4] Research also provides evidence for the long-term positive effects that school-based SEL programs can foster across diverse and geographic contexts and age groups. [3]

Indicators:
34 – Children – Grades 4-6 – Self-Esteem, Self-Confidence, Optimism
38 – Youth – Grades 7-12 – Self-Esteem, Self-Confidence, Identity

Calgary
AfterSchool

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[1] Policy Horizons Canada. 2010. Canada@150: Research Report. Canada: Public Works and Government Services Canada. Pages 143-145.

[2] Cooper, Merrill. 2014. "What needs to be prevented." Positive child and youth development. FCSS Calgary Research Brief 1. Calgary: City of Calgary, FCSS Calgary. Page 2.

[3] Taylor, R. D., E. Oberle et al. 2017. "Promoting Positive Youth Development Through School-Based Social and Emotional Learning Interventions: A Meta-Analysis of Follow-Up Effects." Child Development 88(4): 1156-1171.

[4] Cooper, Merrill. 2014. "Social emotional learning programs." Positive child and youth development. FCSS Calgary Research Brief 1. Calgary: City of Calgary, FCSS Calgary. Page 8.

URBAN SOCIETY FOR ABORIGINAL YOUTH
- **Indigenous Inclusion Program**

Revised 2018 September 25

THEORY OF CHANGE:

Need: Intergenerational trauma is the legacy of numerous traumatic events a community experiences over generations and encompasses the psychological and social responses to such events. Intergenerational trauma can have devastating effects on the health and wellness of Indigenous youth[1]. Health issues such as Hepatitis C, HIV/AIDS, suicide and thoughts of hopelessness, and substance abuse can lead to social exclusion. Indigenous children and youth comprise of 10% of the population, but are disproportionately represented in the sorrow systems. According the Office of the Children and Youth Advocate[23], 69% of children and youth in the child welfare system are Indigenous. The Calgary Plan to End Homelessness[4] shows that Indigenous youth homelessness is ten-fold compared to their Caucasian counterparts. Overwhelmingly, Indigenous youth are over-represented in poverty, addictions and other indicators of trauma-induced cycles.

Goal: To support urban Indigenous youth on their healing journey to increase their overall positive Indigenous identity and increase their inclusion in society

Strategy: The program uses traditional cultural and spiritual practices, and contemporary Western activities, to engage at least 25 Indigenous youth between 25 and 21 years old on a healing journey. The program meets weekly after school from October to June for three hours, with youth meeting at Marlborough Mall before going into the community for programming. It incorporates three foundational healing practices; Reclaiming History/Legacy Education, Cultural Interventions and Western Therapies, to address intergenerational trauma. It includes cultural activities such as smudging and naming ceremonies to increase sense of cultural identity, historic Indigenous knowledge, cultural belonging and empowerment, and personal advocacy. Reclaiming History and Legacy Education allow youth to learn about their history, the impacts on their families and cultural disruption, while creating strategies to overcome and be resilient. The Program also provides opportunities for therapeutic healing such as referrals to mental health supports. Program components are blended with contemporary, fun activities that are youth driven, such as recreation and art projects, to ensure continued engagement.

Rationale: For Indigenous programming to be effective, intergenerational trauma must be addressed as a root cause issue. Three foundational programming components help to address these issues: reclaiming history, cultural interventions, and therapeutic healing, all of which are promising practices that increase positive identity, build positive social ties, and increase social inclusion among Indigenous peoples. The cumulative effects of trauma are passed down along generations and often are amplified or, cause other unpredictable impacts that need to be addressed through programming to improve the positive identity of Indigenous youth. Programs that blend best practices, Indigenous ways of knowing, and traditional healing can, in the long term, provide increased positive Indigenous identity and greater social ties, which improve social inclusion.

Indicators:
#49 – Historical Aboriginal Knowledge
#50 – Sense of Cultural Belonging and Feeling Supported
#51 – Personal Advocacy and a Sense of Empowerment

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[1] Pinnow, Joanne. 2014. "The Emotional dimension – The issue." Aboriginal brief. FCSS Calgary Research Brief 6. Calgary: City of Calgary, FCSS Calgary. Page 5.
[2] Noormohamed, Raheem. 2012. Intervention to Address Intergenerational Trauma: Overcoming, Resisting and Preventing Structural Violence. Calgary: Urban Society for Aboriginal Youth, YMCA of Calgary, and University of Calgary. Page 6.
[3] Noormohamed, Raheem. 2012. Intervention to Address Intergenerational Trauma: Overcoming, Resisting and Preventing Structural Violence. Calgary: Urban Society for Aboriginal Youth, YMCA of Calgary, and University of Calgary. Page 6.
[4] Calgary Plan to End Homelessness. (2017, May 5). Calgary Plan to Prevent and End Youth Homelessness - 2017 Refresh. Retrieved from Homeless Hub: homeless.hub.ca/sites/default/files/Youth_Plan_Refresh_2017.pdf

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WEST HILLHURST GO-GETTERS ASSOCIATION

- **Seniors Programs**

THEORY OF CHANGE:

Need: In 2017, 11 per cent of Calgary's population was aged 65 or older, with a 23 per cent population increase projected to occur by 2022. The population aged 75 or older is expected to grow by 14 per cent during the same period. Risk factors associated with social isolation among seniors include age over 75, low income, living alone, health or mobility difficulties, and language or cultural barriers. Currently, 26 per cent of Calgary seniors live alone and almost 40 per cent of unattached Calgary seniors live in poverty.[1]

Goal: To promote social connections and reduce social isolation among seniors by providing programs and services that are accessible, affordable, and account for health, mobility and cultural considerations. Seniors Programs are intended to promote and enable physical, mental, and social engagement within the community.

Strategy: Social connectedness is associated with better physical and mental health, quality of life, and longer life.[2] Seniors centres across the city offer social, educational, recreational, and leisure programs and activities for seniors aged 65 and older. Programs are coordinated by trained staff and, where possible, are designed with local seniors to respond to preferences for social and community engagement and supports; provide physical activity and recreation for seniors of diverse interests and abilities; and create an inviting and inclusive space for connecting to important community supports for seniors. Programming is ongoing and flexible to respond to needs and interests as they are identified. Centres are open year-round on weekdays, as well as some Saturdays and some evenings to host monthly or bi-weekly socials or special events.

Rationale: Social isolation in the seniors' population can be prevented and reduced by enhancing protective factors such as social ties (including with younger friends and neighbours), good health, creative expression, and communication skills. Community engagement can be facilitated with accessible services, access to transportation, and opportunities to take up meaningful roles in society.[3] Programs that capitalize on seniors' experiential knowledge and affirm and enable opportunities for reciprocity, feeling valued, and making meaningful contributions contain the psychological preconditions for building social ties. Best practices include group programs with an educational or training component, intergenerational programs, gatekeeper programs, volunteer opportunities and targeted social or support activities, which can be tailored to participant health and activity limitations.[4] Programs should be facilitated by quality trained staff and enable participant involvement in program design, implementation, and review.[5]

Indicators:
4 – Positive Social Ties and/or Bonding Social Capital
6 – Social Inclusion – Social Participation

[1] The City of Calgary, Calgary & Region Economic Outlook, Spring, 2018.
[2] Austin, C., R. McClelland, J. Sieppert, and E. Perrault. n.d. The Elder Friendly Communities Project: Understanding Community Development and Service Coordination to Enhance Seniors' Quality of Life. Calgary: University of Calgary, Faculty of Social Work. Page 20.
[3] Edwards, P., and A. Mawani. 2006. Healthy Aging in Canada: A New Vision, A Vital Investment From Evidence to Action. Ottawa: Federal/Provincial/Territorial Committee of Officials (Seniors), Healthy Aging and Wellness Working Group. Pages 17-18.
[4] Cooper, Merrill. 2009. "Vulnerable Seniors." Outcome: Positive Social Ties and Vulnerable Populations. FCSS Calgary Research Brief No. 4. Calgary: City of Calgary, FCSS Calgary. Pages 12-15.
[5] Cattan, M., M. White, J. Bond, and A. Learmouth. 2005. "Preventing Social Isolation and Loneliness among Older People: A Systematic Review of Health Promotion Interventions." Ageing and Society 25: 41-67. Pages 57, 61.

WOMEN'S CENTRE OF CALGARY

• **Community Capacity Building Among Peers**

THEORY OF CHANGE:

Need: Many women in Calgary face inequity and social exclusion. Almost eighty per cent of women accessing the Women's Centre report they are part of at least one marginalized group, making them more likely to face social isolation and inequity.[1] Women who are part of further marginalized groups—including Indigenous women, immigrant and refugee women, single mothers, members of the gender and sexually diverse community, women who have been incarcerated, and women living with disabilities—face additional barriers and therefore struggle with even greater challenges.[2]

Goal: To build social capital among women in Calgary and allow vulnerable women in particular to participate more fully in the social, economic, and political life of their communities.

Strategy: The Women's Centre uses a community capacity building peer model based on the key principles of reciprocity, inclusion and trust. The model has three core strategies: connecting with others, getting assistance, and working for change. It offers volunteer opportunities for diverse community members to develop capacity and skills, connect with others and increase social inclusion. The strategies focus on the open-space for all women, opportunities for women to give back and structured capacity-building programming, delivered through training, workshops and practical leadership opportunities. Half of volunteers identify in one or more marginalized group, as well, a significant number have lived in poverty, and/or have experienced a violent relationship. The Women's Centre's community volunteers provide social support to women that use the Centre, direct the Women's Centre operations, provide all services, develop policy and advocacy strategies, help with resource development, and take on various leadership roles such as program planning and representing the Centre in the community. Programs and services, are offered during the day and evening in a community resource centre to ensure optimum community access and participation. Volunteers are required to take diversity and inclusion training. Post testing is done in spring and fall.

Rationale: Research shows that a peer model is an effective strategy for creating social capital. Women who utilize peer programs experience "increased confidence in their capacities, ability to cope with illness, self-esteem, and a sense of empowerment and hope."[3] Research indicates peer volunteers cultivate "strong communication skills, ability to accept responsibility, good judgment, desire to help others, knowledge of available resources, and empathy and warmth."[4] Studies have shown that there is "evidence that peer support delivered in an individual or group format, and delivered at a location such as a women's resource centre, is associated with expanded social networks. This in turn, is associated with positive physical and mental health."[5] Peer-led interventions have also shown effectiveness with not only high-risk and hard-to-reach populations but also cultural minority populations".[6] When there is association and social inclusion, people experience a strong sense of belonging and community.

Indicators:
6 – Social Inclusion – Social Participation

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[1] Women's Centre of Calgary. 2017. A Gendered Analysis for Poverty Reduction in Alberta: Recommendations. Calgary: Women's Centre of Calgary. Page 1.

[2] Statistics Canada. Table 202-0802 - Persons in low income families, annual, CANSIM (database).

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[4] Ibid

[5] Cooper, Merrill. 2014. "Peer Support Groups." Positive social ties and vulnerable populations. FCSS Calgary Research Brief 4. Calgary: City of Calgary, FCSS Calgary. Page 11.

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WOMEN'S CENTRE OF CALGARY
- **CAS, Girl Power, Girl Force, Girl Lead YYC**

THEORY OF CHANGE:

Need: Systemic barriers including poverty, gender expectations, sexual pressures, and racism limit girls' abilities to create full, healthy lives. Pressure to perform traditional gender roles is associated with lower self-esteem in girls.[1] While 35 per cent of girls in grade six and 44 per cent of girls in grade ten experience emotional issues. These numbers are higher than those found amongst boys.[2] In mixed-gender settings girls often speak less openly about their experiences, and worry more about their appearance and being teased.[3] Twenty five percent of grade 10 girls do not feel safe at school due to sexual harassment, bullying, racism and homophobia.[4]

Goal: To support girls to build social-emotional competencies, critical thinking and leadership skills in a supportive community of girls so that they use their strengths to address root causes of issues affecting their lives, leading to enhanced well-being and social inclusion among vulnerable youth.

Strategy: Programs target three cohorts: Girl Power (GP) grades 5-6; Girl Force (GF) grades 7-9; and Girl Up! (GU!) grades 10-12. Participants are from diverse backgrounds, including: recent immigration; Indigenous or racialized identity; and living in poverty with limited social supports. Sessions combine hands-on socio-emotional learning (SEL) with a focus on leadership and girl-identified topics such as healthy relationships, body image, racism, sexism, poverty, human rights and mental health. Sessions are facilitated by volunteers, staff and the girls themselves with an emphasis on nurturing natural supports. GP runs for two hours, twice a week with up to 18 girls and GF and GU! run for two hours, once a week with up to 20 participants each from September-June. All programs have a summer component and opportunities for the girls to organize bigger events and connect across programs. There is ongoing registration with post-testing done in December, March and June.

Rationale: Programs meet the nine characteristics of effective prevention programming for children and youth. It is theory-driven, comprehensive, uses varied hands-on learning methods, provides adequate quantity and duration of programming, creates opportunities for girls to increase their confidence and self-esteem while building positive peer and adult supports, outcomes are tracked and measured, staff are well-trained, curriculum is adapted according to participants' needs, and intervenes to support girls at significant points in their lives.[5] Programs use Natural Supports principles[6], and SEL domains.[7] The program's theoretical basis comes from Brown's work about providing a safe space and tools for critical thinking through which girls learn positively affect the world around them.[8]

Indicators:
#34 – Children – Grades 4-6 - Self-Esteem, Self-Confidence, Optimism
#38 – Youth – Grades 7-12 – Self-Esteem, Self-Confidence, Identity

Calgary
AfterSchool

[1] Brown, L. M. (2016). Powered by Girl: A Field Guide for Supporting Youth Activists. Boston, MA: Beacon Press.
[2] Cooper, Merrill. 2014. "The issue." Positive child and youth development. FCSS Research Brief 1. Calgary: City of Calgary, FCSS Calgary. Page 1.
[3] Girls Action Foundation. (2010). *Amplify Toolkit.* Montreal, QC: McKenzie, C.; Canadian Women's Foundation. (2014). *Building Strong Girls: Girls Fund 2009-2012 Evaluation Report.* Toronto, ON: Alcalde, J., Hayward, Loomis & Hodgson.
[4] Glass, J. & Tunstall, L. (2013). *Beyond appearances: Brief on the main issues facing girls in Canada*. Montreal, QC: Girls Action Foundation.
[5] Cooper, Merrill. 2014. "What works to prevent problems and improve developmental outcomes." Positive child and youth development. FCSS Research Brief 1. Calgary: City of Calgary, FCSS Calgary. Page 3.
[6] The Change Collective. (2017). Working with vulnerable youth to enhance their natural supports: A Practice framework. Calgary, AB: United Way of Calgary and Area.
[7] Smith, C., McGovern, G., Larson, R., Hillaker, B & Peck, S. (2016). Preparing Youth to Thrive: Promising Practices for Social Emotional Learning. Washington, D.C.: Forum for Youth Investment.
[8] Lyn Mikel Brown. Website. https://www.colby.edu/directory/profile/lyn.brown/

WOMEN'S CENTRE OF CALGARY

- **Work for Change: A Woman's Policy Agenda**

THEORY OF CHANGE:

Need: All women in Canada experience barriers and discrimination simply because of their gender. Women face poverty, precarious work, restricted access to childcare, violence, and discrimination.[1] There is a need to address these issues at a policy and systems level and to support participation of women who experience significant forms of marginalization. By using a community capacity building peer model, women build skills to address social issues at a systems level and advocate for policy initiatives which are necessary for significant social change to occur.

Goal: To create a women's policy agenda to improve the status of women in Calgary and Alberta.

Strategy: The Work for Change initiative focuses on affecting change to broad systems and specific policies by advocating for the use of a gender plus lens on public policy development and on emerging issues that impact women in Calgary and Alberta. The Women's Centre connects with diverse, grassroots groups and individual women to determine the issues and policies that most impact their lives and to reduce barriers to marginalized women's involvement in the decision making process. Information gathered informs the diverse range of issues which are addressed by a women's policy agenda. Volunteers on committees organize opportunities for the community to participate in training, discussions and activism on a range of social and environmental issues. Board committees direct Reconciliation and social policy work. Staff and volunteers develop an evidence-based, field-informed women's policy agenda with prioritized recommendations for action, related advocacy plans and coordinated government relations efforts. Internally, the Centre is building organizational capacity to change systems by developing and implementing a Reconciliation Strategy. In the community, the Women's Centre provides a gender plus lens and training to collaborations and partnerships and assists partners in identifying barriers that impact women. In addition, we work with the community to evaluate and monitor policy change at municipal and provincial levels.

Rationale: Research reflects the need for an approach to policy and systems change that addresses the intersecting and compounding challenges women face.[2] Change is embedded in a community capacity building peer model since women's participation in community and policy level change is essential to their individual well-being and sense of agency in their own lives, contributing to maintaining a good society.[3] When women participate, they experience social inclusion and "increased confidence in their capacities, ability to cope with illness, self-esteem, and a sense of empowerment and hope."[4] Evaluating and monitoring policy change and its impact are best practices.[5] Collaborative work is fundamental to addressing root causes through policy initiatives.[6]

Indicators:
Policy or Systems Change

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[1] Canadian Women's Foundation. 2015. Fact Sheet: Moving Women Out of Poverty. Toronto: Canadian Women's Foundation. Pages 1-4.

[2] Vall, C., and A. Thompson. 2012. From Getting By to Getting Ahead: Six Levers for Building the Wellbeing of Families with Lower Incomes. Calgary: United Way Calgary and Area. Page 47.

[3] Knight, Barry, Hope Chigudu, and Rajesh Tandon. 2002. Reviving Democracy: Citizens at the Heart of Governance. London, UK and Sterling, VA: Earthscan Publications Limited. Pages 76-84.

[4] Solomon, P. 2004. "Peer support/peer provided services underlying processes, benefits, and critical ingredients." Psychiatric Rehabilitation Journal 27(4): 392-401.

[5] Caledon Institute of Social Policy. 2009. Collaboration on Policy: A Manual developed by the Community-Government Collaboration on Policy. Ottawa: Caledon Institute of Social Policy. Page D9.

[6] Calgary Poverty Reduction Initiative. 2013. Enough for All: Unleashing our Communities' Resources to Drive Down Poverty in Calgary. Final Report of the Calgary Poverty Reduction Initiative, Vol. 1. Calgary: City of Calgary and United Way of Calgary and Area. Page 4.

WOOD'S HOMES

- **Community Stabilization Program**

THEORY OF CHANGE

Need: Young people who are experiencing a potential breakdown in their living situations, whether it be family or an alternative caregiver, run the risk of entering into a trajectory that puts them at risk of homelessness, addictions and exploitation. Many youth look back on their lives and pinpoint the key moment that the right supports or interventions could have changed their path into homelessness[1]. Homeless youth have been recognized as one of the fastest growing, and particularly vulnerable, sub-groups with the homeless population[2].

Goal: To provide a place for youth to stay where they will be safe, experience stability, work with staff to explore their crisis, and engage in services in order to transition either back to their family or to an alternate caregiver. To provide prevention and diversion services, with particular focus on family connection and strengthening supports to prevent family breakdowns.

Strategy: The Community Stabilization Program is a 24/7 therapeutic community based crisis service that provides a temporary placement (1 to 30 days) for youth (12-17) that are experiencing homelessness, serious crisis within their family/caregiver setting, or who have experienced a placement crisis/breakdown. The program assists in stabilizing behaviours by highlighting strengths, solutions, permanency needs, and connections with youth and their families/caregivers. The program focus is on providing safety, solution focused goal setting, family and natural support meetings, conflict resolution and engaging with therapeutic and support services.

The program provides youth a supportive and structured environment where there are opportunities to examine previous thinking, coping and behavioural patterns, experiment with new ways of interacting with others, and develop plans and strategies for successful reintegration. Academic support is ingrained in programming to assist with engagement and strategy development to increase success in the youths' community school placement. A placement assessment is completed in order to provide recommendations for future placement and/or behavioural intervention, as well as clinical consultation, and aftercare services are available to support successful crisis diffusion and transition. The program also provides transition support for youth who are disconnected from education, employment and housing.

Rationale: Youth who are experiencing conflict at home, exposure to domestic violence and or addictions are at risk of family/placement breakdown and therefore at risk for homelessness, exploitation, and street involvement. Prevention means working upstream to prevent new cases through identifying and reducing risks that may increase the likelihood that individuals become homeless.[3] It is essential to provide a safe, relational and family-centred environment designed to aid in the development of skills and the connection to supports that will increase a youth/families resilience in managing future crisis. When risk factors that threaten family stability are reduced and supports are in place to assist and strengthen vulnerable families and caregivers, youth have a better chance of well-being, safety and stability.

Indicators:
21 – Parenting – Youth Questions (Grades 7-12)
38 – Youth – Grades 7-12 – Self-Esteem, Self-Confidence, Identity

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[1] Schwan, K., Gaetz, S., French, D., Redman, M., Thistle, J., & Dej, E. (2018). What Would it Take? Youth Across Canada Speak Out on Youth Homelessness Prevention. Toronto, ON: Canadian Observatory on Homelessness Press.
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[3] Gaetz, S. (2014). Coming of Age: Reimagining the Response to Youth Homelessness in Canada. Toronto: The Canadian Onservatory on Homelessness Press.

WOOD'S HOMES

- **Eastside Family Centre**

THEORY OF CHANGE:

Need: Annually EFC conducts over 3500 walk-in and short term therapy sessions with the goal of reducing high levels of distress and risk as well as severe levels of anxiety and severe symptoms of depression for individuals, couples and families. On the Patient Health Questionnaire (PHQ-9) and Generalized Anxiety Disorder (GAD-7), 50 per cent of parents and individuals report extreme levels of anxiety and moderate to extreme levels of depressive symptoms[1]. Thirty per cent of individuals and families report that if they had not attended the EFC they would have had no other option for therapy, while 30 per cent report that they would have attended their family doctor and 30 per cent report that they would have attended their closest emergency room.

Goal: To prevent the onset of at risk behaviours by increasing parenting capacity, positive parenting strategies and reduce severe levels of anxiety as well as to promote positive family interaction and strengthen the healthy development, well-being and safety of children and families.

Strategy: Six to eight focused counselling sessions with the same therapist for practical, problem-solving, largely derived from strength-based solution-focused therapy[2]. The intent is for clients to leave the sessions with specific plans that will lead to solutions to their problems[3]. The therapy focuses on working with adolescents and family members. Sessions address issues including: effective communication and increasing positive family interactions, integration of family beliefs and values across the ages, identifying family strengths and how parenting skills and requirements change as children age. All participants are asked to complete a pre-test at the beginning, a post-test after the six to eight focused counselling sessions, and at the completion of the group sessions.

Rationale: Research on the effectiveness of brief interventions shows that the most client change occurs during the initial sessions of the therapeutic encounter. The most common presenting concerns of families and individuals requesting brief mental health support from EFC are family relationship problems and concerns about parent-child relationships[4]. Parents that use of positive parenting model good values, attitudes and behaviours, establish routines and enforce rules[5] [6]. At the EFC, group and individual family support focuses on factors related to effective parent training including: increasing positive parent-child interactions and emotional communication skills.

Indicators:
19 – Family Cohesion – Parent / Adult Questions
20 – Parenting – Parent Questions

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[1] Stewart, J. McElheran, N., Park, H., Oakander, M., MacLaurin, B., Fang, C., & Robinson, A., (2018) Twenty-five years of walk-in single sessions at the eastside family centre: clinical and research dimensions , In M. Hoyt, M. Bobele, A. Slive, J. Young & M. Talmon (Eds.), Single Session Therapy by Walk-in or Appointment: Administrative, Clinical and Supervisory Aspects of One-at-a Time Services, New York: Routledge.

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WOOD'S HOMES

- **EXIT Community Outreach**

Revised 2019 November 21

THEORY OF CHANGE:

Need Homelessness in Calgary continues to be on the rise over time. The Calgary Homeless Foundation's 2014 Point in Time Winter Report, found a 10.8 per cent increase in people experiencing homelessness relative to the same count conducted in 2012[1]. A 2011 Calgary study showed that 70 per cent of youth surveyed reported being victims of violence on the street and that they were violent towards others while on the street[2]. Thirty-three per cent of street-involved youth reported their parents asked them to leave the family home[3].

Goal: Provide immediate on-site intervention, community prevention and diversion support to vulnerable and at risk youth. Through a flexible and comprehensive continuum of service located onsite, clients will increase their well being, maintain community connection, support exiting precarious living situations and promote self sufficiency.

Strategy: The EXIT Outreach program is embedded within the newly created EXIT Youth Hub.The EXIT Youth Hub's approach to working with vulnerable street-involved youth is holistic and based on the following principles: (1) A One-Stop Shop Approach: Comprehensive services and expertise under one roof, (2) Trauma Informed Practice: that focuses on attachment, self regulation and competency, (3) Harm-Reduction: An assessable and flexible harm-reduction approach that meets the client where they are in their process of change, (4) Integration of cultural practice: Opportunities to engage in connection, ceremony and practice, (5) A Practical Health Focus: promote physical/mental health, substance use, and sexual orientation, (6) Natural and Community Supports: Identifying strategies to connect and restore meaningful relationships with friends, family and important systems, (7) Responsive Housing Approach: which co-ordinates and liaises to provide reliable housing solutions, (8) Focus on Employment and Education: opportunities for employment training or to explore education, (9) Collaborative Community Connections: staff work in collaboration with others involved in the client's life from school, health, child welfare, justice and so on in addressing the client's life circumstances.

Rationale: Prevention/education support, access to emergency services and housing/family supports are the three key components of the Province of Alberta's Youth Plan to address homelessness, with an emphasis on prevention and housing supports[4]. Research has shown that young people are more willing to ask for help/have their needs met in one location when they don't have to navigate a complicated system or retell their story[5] Bringing youth services together under one roof provides organized, coordinated and fiscally responsible care in a way that makes sense to youth.[6] Integrated social, psychological and physical support has shown to make a larger positive impact than typical care.

Indicators:
9 – Basic Functional Life Skills
18 – Housing Stability

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[1] Calgary Homeless Foundation. 2014. Point in Time Count Report-Winter 2014. Calgary: Calgary Homeless Foundation. Page 1
[2] Calgary Homeless Foundation. 2011. Plan to End Youth Homelessness in Calgary. Calgary: Calgary Homeless Foundation. Pages 2 and 9.
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WOOD'S HOMES

- **Youth Culinary Arts Program**

THEORY OF CHANGE:

Need: Vulnerable youth require services and training that provides the key elements of employability including fostering the interpersonal skills required to show up every day, get along with co-workers and supervisors. The current rate of unemployment in Canada is 5.5%, while the unemployment rate for youth between the ages of 17 and 25; who are not attending school and/or vocational training; is 11.9%, twice the national average.

Goal: To prepare youth to enter the workforce and secure employment especially in the restaurant industry, allowing them to be self sufficient and leading them out of poverty. To foster self sufficiency and independence through safe food handling, healthy meal planning and foundational culinary skills.

Strategy: Through a structured program, youth learn how to manage conflict, work in a fast-paced setting, develop and increase their skills in reading and math, and increase their confidence. Because many youth in this program face mental health issues, trauma, barriers to employment and even homelessness and a Youth and Family Counsellor is prepared to provide immediate support in addressing these needs and to refer to mental health assistance through external resources. By providing a simulated work environment and opportunities to visit schools and restaurants, youth are exposed to a range of career possibilities. These include returning to school to further their education in the culinary arts or entering the food service industry in different settings. Upon program conclusion, they obtain a certificate of completion, Workplace Hazardous Material Information System certification, as well as an Alberta Health Services food handling certificate, which increases their confidence and credibility when applying for jobs. The youth can earn work experience credits that count towards their high school diploma and are supported in completing a resume and finding meaningful employment. The course runs nine weeks, from 10 a.m. to 4 p.m. Monday to Friday.

Rationale: The best employment training programs are effective in that they meet their objective of improving the employability of marginalized youth by providing them with supports necessary to transition into the world of work."[1]   Focusing on more than skill development (basic need support, mental health support, etc.) will give at risk youth a better opportunity for success in the workplace. A Social Enterprise Intervention approach has been successfully piloted in Los Angeles to engage homeless street youth with mental health issues, high-risk behaviours, and limited service engagement in vocational training and mental health services. Through this program youth gain the desire to further their education and/or become employed in the field. This helps them to break the cycle of underemployment and unemployment so that they become self-sufficient and able to earn a living for themselves, reducing their dependence on the welfare system. In addition, "providing youth with the "Social Enterprise Intervention Model decreases depression, increases self-esteem, improves satisfaction with life, decreases internalizing behaviours and decreases externalizing behaviours."[2]

Indicators:
8 – Social Inclusion – Economic Participation; Education & Training / Employment / Income
38 – Youth – Grades 7-12 – Self-Esteem, Self-Confidence, Identity

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[1] Gaetz, S. and O'Grady, B., (2013). Why Don't You Just Get a Job? Homeless Youth, Social Exclusion and Employment Training. Youth Homelessness in Canada: Implications for Policy and Practice. S. Gaetz, B. O'Grady, K. Buccieri, J. Karabanow and A. Marsolais. Toronto, Canadian Homelessness Research Network Press

[2] Ferguson, K.M., and B. Xie. 2008. "Feasibility Study of the Social Enterprise Intervention with Homeless Youth." Research on Social Work Practice 18: 1 (January): 5-19. Page 7.

YOUTH CENTRAL SOCIETY

- **Youth Empowerment and Leadership Development**

THEORY OF CHANGE:

Need: Youth want to have their voices heard, to be involved and to take leadership roles in the community. However, a 2012 report graded "having a youth voice" in Calgary as a C+.[1] Priorities emerging from the report were to increase awareness of options and opportunities for youth, create more youth groups, and consult with or include youth at all levels of government. In addition, a survey showed that seven in ten Canadian adults believe that Canadian youth are not prepared to be civic leaders. [2]

Goal: To inspire and engage young people, including vulnerable and marginalized youth, to participate in the community through volunteer activities so they gain valuable life and leadership skills, increase self-esteem, have their voices heard, and build positive community connections.

Strategy: The Youth Leadership Development program targets youth aged 12-18 years to support volunteerism and community development through participation on various action committees. In so doing, they develop skills in the areas of decision-making, critical thinking, problem solving, communications, time-management, teamwork, and leadership. Vulnerable and marginalized youth are specifically recruited, encouraged, and supported to be part of the program through presentations at immigrant serving agencies and high-needs schools in Calgary, direct peer-to-peer recruitment, and community agency and teacher referrals. Youth are the decision-makers and leaders of various action committees, with Youth Central staff providing support as mentors and co-facilitators. The committees identify issues, develop plans and strategies for change, recruit and train other youth volunteers for events, and implement action plans. Specialized resources are also brought in to support the specific training needs of each committee. Action committees operate September - May and meet multiple times per month. At least 80 youth per year will directly benefit, many are new immigrants.

Rationale: Research shows there are many advantages to engaging young people, who grow by having positive, fulfilling, and instructive experiences that give meaning to life. They model their identity by mixing with significant adults and peers; develop leadership skills and a sense of responsibility; better understand how communities are built and organized, and the decisions that govern them; and their perceptions are changed.[3] Civically engaged youth enjoy higher self-esteem, as well as general improvement in social and school skills, greater self-confidence and compassion, stronger ties with family and peers, and reinforced moral values and integrity.[4] Individuals involved in pro-social activities such as volunteer work are less likely to use cigarettes, drugs and alcohol; engage in risky behaviour; engage in violent behaviour or be arrested; or drop out of school; and more likely to complete a college degree than youth who were not engaged. Engaged youth are also less depressed, more physically active, obtain higher grades in school, and show a greater commitment to their friends, families, and communities.[5]

Indicators:
38 – Youth – Grades 7-12 – Self-Esteem, Self-Confidence, Identity

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[4] Ménard, Marion. 2010. Youth Civic Engagement. Library of Parliament Background Paper. Publication No. 2010-23-E. Ottawa: Library of Parliament, Parliamentary Information and Research Service, Social Affairs Division. Page 3.

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