COMMON OUTCOMES DATA SUMMARY

Aggregate of Common Outcomes Report Data for 2014
INTRODUCTION

Edmonton Region Child & Family Services (CFS), City of Edmonton Family and Community Support Services (FCSS), United Way of the Alberta Capital Region (UWay) and numerous funded community agencies work together to provide a continuum of programs and services to meet the needs of all community members. In order to provide a summary of some of the social impacts and outcomes the social services sector is achieving, funders and funded agencies continue to work together to implement a common outcomes reporting form aimed at simplifying data collection and highlighting the positive difference programs are making in the community.

It is important to recognize that this report is not exhaustive of the work the social services sector is accomplishing as it only includes data from those programs that utilize the common outcomes report.

Due to the complexity of identifying, implementing and collecting common outcomes, the report focused heavily on outputs and activities for the first several years. However, after many years of consultation, development, and testing, 2013 was the first year that the reporting form enabled funded agencies to collect data focused on common outcomes and indicators. Below are a few things to note about the contents of this report and the use of the information submitted:

- Funders and funded agencies continue to work together to revise and refine the data collection tools and methods.
- Data was collected from 106 funded agencies that provided supports through 236 programs.
- The funders do not have expectations about the percentage of positive change programs are reporting with their common outcomes. Funders and funded agencies engage in dialogue and are beginning to evaluate the data to see where program improvements can be made.
- While funded agencies are asked to report the number of unique participants in each program, it is important to recognize that for some programs this is challenging and there is also no system in place to track unique participants across a wide spectrum of services.
- It is of value to gather data and report on the number of Aboriginal and Immigrant clients the funded agencies support. Funded agencies confirm that this number is under-reported due to privacy guidelines.
- New this year, the stories included in this report were taken directly from 2014 Common Outcomes Reports submitted by funded agencies. The stories have not been altered except that, where required, participant and staff names have been changed in order to maintain confidentiality. Participants and agency staff have given permission to share these stories, and each story is linked to a particular Program Area and outcomes within that Program Area. We sincerely thank participants and agencies for sharing their stories.

For those new to the common outcomes report, below is the outcome reporting structure that funded agencies report to:

- **Program area** – Each program fits within 1 of 18 program areas;
- **Outcome** – Each program must report on at least 1 of up to 4 outcomes associated with it;
- **Indicator** – Each program must report on at least 1 of up to 4 indicators associated with each outcome.

Program areas, outcomes and indicators were developed in collaboration with funders, funded agencies, and consultants.
FUNDING OVERVIEW

Agencies include the total amount of funding provided by each funding source (CFS and/or FCSS and/or UWay) for the program.

In “Other Funding” agencies report all other sources (fundraising; grants; other funders).

Total funding reported in 2014 was $72,835,556.

Despite funding levels being maintained or slightly increased in 2014, reported funding levels are showing a decrease. This is most likely due to reporting error. In addition, dollars reflected are not exhaustive of all community funding by the three funders.
LIST OF FUNDED AGENCIES

106 Agencies reported on the common outcomes report in 2014

Abbottsfield Youth Project (AYP) Society
ABC Head Start Society
Aboriginal Counseling Services Association of Alberta
Action for Healthy Communities Society of Edmonton
Alberta Caregivers Association
Alberta Parenting for the Future Association
AltaCare Resources Inc.
Arthritis Society - AB & NWT
ASSIST Community Services Centre
Ben Calf Robe Society
Bent Arrow Traditional Healing Society
Beverly Daycare Society & Family Resource Centre
Bissell Centre
Boyle Street Community Services
Boys & Girls Club of Leduc
Boys & Girls Clubs Big Brothers Big Sisters of Edmonton & Area
Canadian Arab Friendship Association of Edmonton
Canadian Mental Health Association
Canadian National Institute for the Blind
Catholic Social Services
CEASE - Centre to End All Sexual Exploitation
Centre for Family Literacy Society of Alberta
City West Child Care & Community Support Society
Community Options - A Society for Children & Families
Connect Society
Dickinsfield Amity House
Edmonton Aboriginal Seniors Centre
Edmonton City Centre Church Corporation - E4C
Edmonton Epilepsy Association
Edmonton Gleaners Association
Edmonton Immigrant Services Association
Edmonton John Howard Society
Edmonton Meals on Wheels
Edmonton Mennonite Centre for Newcomers
Edmonton Multicultural Coalition Association
Edmonton Seniors Centre
Eldercare Edmonton Society for Adult Day Programs
Elizabeth Fry Society of Edmonton
Ft. Saskatchewan Boys’ & Girls’ Club
Ft. Saskatchewan Families First Society
Fulton Child Care Association
Gateway Association for Community Living
Goodwill Industries of Alberta
Governors of the University of Alberta - Institute for Sexual Minority Studies and Services (iSMSS)
Healthy Families Healthy Futures Society
Information and Volunteer Centre for Strathcona County
Inner City Youth Development Association
Institute Guy-Lacombe de la famille
Islamic Family & Social Services Association
Jasper Place Child & Family Resource Society
Jewish Family Services
KARA Family Resource Centre
Kids Kottage Foundation
Landsdowne Child Care & Family Centre
Leduc & District Food Bank
Leduc County FCSS
Lobstick Successful Kids & Families’ Society
Mediation & Restorative Justice Centre
Métis Child & Family Services Society
Mill Woods Family Resource Centre Society
Mill Woods Seniors Activity Centre
Multicultural Family Resource Society
Multicultural Health Brokers Co-operative
Multicultural Women & Seniors Services Association
Native Counselling Services of Alberta
Northwest Edmonton Seniors Society
Norwood Child & Family Resource Centre
Old Strathcona Youth Society
Oliver Centre-Early Learning Programs for Children & Families Society
Operation Friendship Seniors Society
Options Sexual Health Association
Pride Centre of Edmonton
Primrose Place Family Centre
Project Adult Literacy Society - PALS
Senior Citizens Opportunity Neighbourhood Association
Seniors Association of Greater Edmonton (SAGE)
Sexual Assault Centre of Edmonton
Society of Seniors Caring About Seniors in S.E. Edmonton
South East Edmonton Seniors Association
Spinal Cord Injury
St. Albert Community Information and Volunteer Centre
St. Albert Family Resource Centre
St. Albert Food Bank
St. Albert Stop Abuse in Families
Strathcona County FCSS
Strathcona Place Seniors Society
Strathcona Shelter Society
Sturgeon School Division
Terra Centre for Teen Parents
The Africa Centre
The Association for Evergreen Youth
The Canadian Red Cross Society
The Candora Society of Edmonton
The Family Centre of Northern Alberta Association
The Red Road Healing Society
The Salvation Army
The Support Network
Today Family Violence Help Centre
Town of Gibbons
Victorian Order of Nurses
West End Seniors Activity Centre
Women Building Futures Society
Y.M.C.A. of Northern Alberta
Y.W.C.A. of Edmonton
Yellowhead County
Youth Emergency Shelter Society - YESS
A Unique Participant is a participant in a program who receives direct services.

Each program aims to count each participant only once during the time period covered regardless of the number of program related services that participant receives. Some programs are unable to track the ‘unique’ number of participants so this number is not exhaustive of the work in our community and does not take into consideration participants that access similar services in different programs. It also includes Information & Referral calls.

We attribute the difference in number of programs reported over four years to funding changes, reporting process changes and increased accuracy in reporting.

### Number of Programs Reporting

<table>
<thead>
<tr>
<th>Year</th>
<th>Programs Reported</th>
</tr>
</thead>
<tbody>
<tr>
<td>2011</td>
<td>249</td>
</tr>
<tr>
<td>2012</td>
<td>218</td>
</tr>
<tr>
<td>2013</td>
<td>226</td>
</tr>
<tr>
<td>2014</td>
<td>236</td>
</tr>
</tbody>
</table>

Majority of programs that receive funding submit information on the common outcomes report.

### Unique Participants Reported

332,833 Unique Participants were supported by programming in 2014.

Participants may access more than one program across multiple service areas and there are additional challenges to collecting the number of unique participants. However, this number does represent the significant volume of work occurring in the social services sector.

$72,835,556$ total funding reported

\[
\text{Average investment per participant} = \frac{72,835,556}{332,833} \approx \$218.84
\]

### Unique Participants by Program Area

![Graph showing unique participants by program area](image)
ABORIGINAL PARTICIPANTS REPORTED

Aboriginal populations include those who identify themselves as: Aboriginal, First Nations, Métis or Inuit.

In 2012
21,724 or 10% of participants reported were Aboriginal

In 2013
26,056 or 9% of participants reported were Aboriginal

In 2014
34,450 or 10% of participants reported were Aboriginal

Program areas reporting the highest number of Aboriginal participants

<table>
<thead>
<tr>
<th>Year</th>
<th>1. Information &amp; Referral</th>
<th>2. Family Support</th>
<th>3. Children &amp; Youth</th>
</tr>
</thead>
<tbody>
<tr>
<td>2012</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2013</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2014</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Program areas reporting the lowest number of Aboriginal participants

<table>
<thead>
<tr>
<th>Year</th>
<th>16. Community Development</th>
<th>17. Public Education</th>
<th>18. Disability Support</th>
</tr>
</thead>
<tbody>
<tr>
<td>2012</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2013</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2014</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Many agencies choose not to ask participants to identify their cultural background and as a result the numbers of participants are under reported. Agencies and funders have identified this area as an opportunity for improvement and growth on future data collection and reporting.
IMMIGRANT & REFUGEE PARTICIPANTS REPORTED

An immigrant or refugee can be someone who is dealing with the challenges of living in Canada regardless of how many years they have lived in Canada.

In 2012
27,484 or 12% of participants reported were Immigrants or Refugees

In 2013
26,652 or 9% of participants reported were Immigrants or Refugees

In 2014
32,865 or 10% of participants reported were Immigrants or Refugees

Program areas reporting the highest number of Immigrant or Refugee participants.

2012
1. Community Development
2. Family Support
3. Seniors

2013
1. Seniors
2. Community Development
3. Early Childhood

2014
1. Seniors
2. Parent Education
3. Family Support

Program areas reporting the lowest number of Immigrant or Refugee participants.

2012
16. Prevention of Family Violence & Bullying
17. FASD
18. Disability Support

2013
16. At Risk Youth
17. FASD
18. Disability Support

2014
16. At Risk Youth
17. FASD
18. Disability Support

Many agencies choose not to ask participants to identify their cultural background and as a result the numbers of participants are under reported. Agencies and funders have identified this area as an opportunity for improvement and growth on future data collection and reporting.
Proportionally, the breakdown of participants by age has remained consistent from 2012-2014. The 18-64 age category is the largest and as a result has the largest number of participants served. Based on the 2014 census data, the unique participants by age is proportionate to the communities’ reported age composition such that participants aged 18-64 make up the majority, followed by participants aged 0-17 and then participants aged 65+.

It is interesting to note that according to the census 19% of the reported population is aged 0-19, yet 31% of all participants served in our sector are aged 0-17.
**PROGRAM VOLUNTEERS**

Program volunteers are the number of unique volunteers who have offered their time at no cost to the program. This does not include individuals who are work experience students or those completing community service hours.

"Volunteering brings us closer together because we are all working towards a common goal of improving our community." - Program Participant

<table>
<thead>
<tr>
<th>2014 Top 5 Program Areas with the most Volunteers</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Basic Needs</td>
</tr>
<tr>
<td>2. Volunteer Support</td>
</tr>
<tr>
<td>3. Children &amp; Youth</td>
</tr>
<tr>
<td>4. Information &amp; Referral</td>
</tr>
<tr>
<td>5. Seniors</td>
</tr>
</tbody>
</table>

714,300 reported volunteer hours

$12,350,247 *

Volunteer Contribution to the Social Services Sector.

### Number of Volunteers

<table>
<thead>
<tr>
<th>Program Area</th>
<th>Number of Volunteers 2014</th>
<th>Number of Volunteers 2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Volunteer Support</td>
<td>4000</td>
<td>3000</td>
</tr>
<tr>
<td>Seniors</td>
<td>6000</td>
<td>5000</td>
</tr>
<tr>
<td>Public Education</td>
<td>1000</td>
<td>900</td>
</tr>
<tr>
<td>Prevention of Family Violence</td>
<td>800</td>
<td>700</td>
</tr>
<tr>
<td>Parent Link Centres</td>
<td>500</td>
<td>400</td>
</tr>
<tr>
<td>Parent Education</td>
<td>300</td>
<td>200</td>
</tr>
<tr>
<td>Information and Referral</td>
<td>4000</td>
<td>3000</td>
</tr>
<tr>
<td>Home Visitation</td>
<td>1000</td>
<td>900</td>
</tr>
<tr>
<td>Head Start</td>
<td>200</td>
<td>100</td>
</tr>
<tr>
<td>FASD</td>
<td>100</td>
<td>90</td>
</tr>
<tr>
<td>Family Support</td>
<td>800</td>
<td>700</td>
</tr>
<tr>
<td>Early Childhood</td>
<td>400</td>
<td>300</td>
</tr>
<tr>
<td>Disability Support</td>
<td>200</td>
<td>100</td>
</tr>
<tr>
<td>Community Development</td>
<td>300</td>
<td>200</td>
</tr>
<tr>
<td>Children and Youth</td>
<td>4000</td>
<td>3000</td>
</tr>
<tr>
<td>Basic Needs</td>
<td>5000</td>
<td>4000</td>
</tr>
<tr>
<td>At Risk Youth</td>
<td>1000</td>
<td>900</td>
</tr>
<tr>
<td>Adult Support</td>
<td>500</td>
<td>400</td>
</tr>
</tbody>
</table>

*Living Wage was used to calculate this number, since we have not yet calculated a living wage for Edmonton, we used Vibrant Calgary (2014) Living Wage of $17.29 [http://www.livingwagecanada.ca/index.php/living-wage-communities/alberta/]*
Programs are asked to report when outcome data was collected in relation to program delivery.

When Data Was Collected

Data collection can be attempted more than once with each participant. In total, data collection was attempted 418,593 times. Of those attempts, there are evaluation results for 82% of them. This response rate meets and exceeds standard data collection completion rates.

Average Evaluation Completion Rate by Program Area

[Bar chart showing average completion rates by program area for 2013 and 2014]
COMMON OUTCOMES REPORT SUMMARY BY PROGRAM AREA

ADULT SUPPORT

Programs focused on providing individual support for personal issues that will improve the quality of life of adults.

# 25 Programs
$ 3,703,802 Funding
490 Volunteers
27,727 Volunteer Hours

"Before I started attending [the program] group activities I did not know anyone else in the city apart from my family members. Now I have 5 friends I interact with on a regular basis. We formed a closed Facebook page. It is a mix of newcomer and volunteer friends. We call each other when we need help, support or just someone to talk to and share experiences."
- Program Participant

Most used tools
1. Survey/Questionnaires
2. Direct Observations
3. Interviews

Majority of data was reported as collected during the program.

Percentage of participants who experienced positive change by outcome, including the indicators with the lowest and highest reported positive change.

* Note: relative to the number of participants data was collected from. Most programs do not collect data from 100% of participants.

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Participants have healthy relationships</th>
<th>Participants report that they feel respected by important others</th>
<th>Participants report that they feel supported/cared for by important others</th>
<th>Participants have the skills needed to address identified issues</th>
<th>Participants report having personal characteristics that are likely to help them address their identified issues such as resiliency, optimism, positive self-esteem, sense of meaning/purpose</th>
<th>Participants report an increased capacity to solve day-to-day problems and challenges</th>
<th>Participants increase their network of social support</th>
<th>Participants report (1) making new friends, or (2) maintaining friendships, through their involvement in the program (could be friends within the program or friends they make in community, with support from the program)</th>
<th>Participants report that they have one or more new people that they turn to for help</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percent</td>
<td>87%</td>
<td>65%</td>
<td>92%</td>
<td>90%</td>
<td>90%</td>
<td>92%</td>
<td>94%</td>
<td>96%</td>
<td></td>
</tr>
</tbody>
</table>
Adult Support Narrative

Agency: Boyle Street Community Services
Program: Urban Counselling Network
Outcomes: Participants have healthy relationships
Participants have the skills needed to address identified issues
Participants increase their network of social support

Sylvie is a 35 year old mother of 3 children under 4 years old. She and her partner moved from Ontario to Edmonton because her partner was promised employment. When they arrived, Sylvie’s partner was not given the job he was promised. After 2 weeks of staying in a hotel, their money was running out. Sylvie’s partner decided to return to Ontario to see if he could find other employment – he promised to return or send for Sylvie and the children. Days alone with the kids turned into weeks; she and her partner hadn’t talked in a long time, he was under a great deal of pressure too. In desperation Sylvie turned to Social Services.

With Alberta Works financial support she felt a bit of relief, but still had overwhelming anxiety, sadness, and confusion about what was next. Was her relationship over? Where would she and the kids live? Would she ever stop crying? She received a referral to Boyle Street Community Services where she was taken into the housing program as a family in need of emergency housing. The Boyle Street housing program in turn referred Sylvie to a counsellor who came to visit her at her new apartment. It was unusual for a counsellor to come to people’s homes, but this counsellor “met her where she was at” and visited her regularly to talk about her fears and loneliness.

After 8 home counselling sessions, Sylvie began to feel stronger and more in control of her life. Months later Sylvie’s partner eventually came back to Alberta. Through counselling Sylvie learned skills that she applied to her parenting and relationship: how to express her feelings, how to make realistic plans for the future, strategies to calm her anxiety, and conflict resolution techniques. Through her counselling she became a stronger mother and partner.

Average investment per participant for this program area is $139.00

*This number is based on the total participants reported and the total amount of funding reported.
AT RISK YOUTH

Programs that work with youth who are in environments in which they may engage in high risk behaviors.

# 13 Programs
$ 5,907,234 Funding
♀ 53 Volunteers
🕰️ 4003 Volunteer Hours

"Participants demonstrate and report that they have important others that support and care for them. Prior to the participant's involvement in the program, he or she typically felt like they had nowhere to go for support. One participant noted that, "Before...I felt I had nobody I could talk to and when talking to people I felt unsure. But I feel like now there is someone." - Program Staff

Most used tools
1. Survey/Questionnaires
2. Interviews
3. Direct Observations

Majority of data was reported as collected during the program.

Percentage of participants who experienced positive change by outcome, including the indicators with the lowest and highest reported positive change.

* Note: relative to the number of participants data was collected from. Most programs do not collect data from 100% of participants.

<table>
<thead>
<tr>
<th>Participants feel supported</th>
<th>94%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participants report having sources of community or professional support in which they can confide/receive advice</td>
<td>93%</td>
</tr>
<tr>
<td>Participants report having close friends and/or close relatives with whom they can confide/receive advice</td>
<td>96%</td>
</tr>
<tr>
<td>Participants have healthy relationships</td>
<td>94%</td>
</tr>
<tr>
<td>Participants report that they feel supported/cared for by important others</td>
<td>86%</td>
</tr>
<tr>
<td>Participants report that they feel comfortable communicating concerns to important others</td>
<td>97%</td>
</tr>
<tr>
<td>Participants have the skills needed to address identified issues</td>
<td>91%</td>
</tr>
<tr>
<td>Participants report having personal characteristics that are likely to help them address their identified issues such as resiliency, optimism, positive self-esteem, sense of meaning/purpose</td>
<td>89%</td>
</tr>
<tr>
<td>Participants report an increased capacity to solve day-to-day problems and challenges (problem-solving skills)</td>
<td>95%</td>
</tr>
</tbody>
</table>
At Risk Youth Narrative

Agency: E4C
Program: Kids in the Hall Bistro Program
Outcomes: Participants have healthy relationships
Participants have the skills needed to address identified issues
Participants feel supported

My life journey definitely wasn’t an easy one. I’m not telling you my story for reasons of sympathy votes or anything of the sort. I am simply helping people understand what an incredible place Kids in the Hall Bistro is and how it has forever left an unchanging mark on my life.

I’ve been pretty much raising myself since I was 6 years old. My mom got the smart idea to marry her drinking buddy (my dad) and when he left and they divorced I was about 4. So my mom, still being the addict she was, would go binge drinking for days where my sisters and I wouldn’t see her. She left us, usually with guys she dated, so we were left to fend for ourselves.

Because of my upbringing I was way too wise beyond my years. Elementary and pretty much all school I never fit in, I was always bullied and beat up or had garbage thrown at me on a daily basis. Took me till grade 6 to make my first friend in school. I had teachers make fun of me in front of my class because I was a bit slower than my fellow IB program students and no one likes a weak link.

This is all why it took me till I was 18 to find a job or even start looking. Seeing the worst side of people my whole life and being my own best friend after some time because I just gave up on people. I thought being in a work place would be the exact same. Until my new school, Fresh Start, told me about an amazing work program for youth that need a little extra help and somewhat get used to a work place.

I was then introduced to Kids in the Hall Bistro. I was so completely scared and a bit skeptical, I thought I was going to be written off as another messed up kid whose angry at the world and I just wanted everyone to feel the pain and helplessness I’ve felt my whole life but what I found when I finally showed up were people that actually cared I existed and saw me as a person who wanted to help rather than hurt me.

Since I’ve started working at the bistro I have completely come out of my shell, I thought I was going to be defined by my addict parents, who unfortunately have mental health issues, but I am not. At the bistro I have support and so much confidence, I actually got my Proserve done and was paid for by my manager which is the most amazing gift I have ever been given ever. Having an opportunity to actually show my skills and be in such a positive environment where my supervisors and manager instead of yelling at me telling me everything I do wrong they lift me up and tell me when I’m doing right. My whole life I wanted to just feel accepted and that I belong and have a family. The Bistro is my family, always and I am finally accepted and respected. Even when I write this I still can’t even begin to find the right words or even justify how much the Bistro has completely and utterly changed my life, I will always be thankful.

Youth 18

Average investment per participants for this program area is $1,934.26

*This number is based on the total participants reported and the total amount of funding reported.
BASIC NEEDS

Programs focused on providing the necessities of life (e.g. food, clothing, shelter).

7 Programs
$2,848,331 Funding
4782 Volunteers
62,618 Volunteer Hours

"The key themes we have observed have been an increase in newly homeless individuals, many of them coming from other provinces and trying to adjust to a new city as well and the organizations that may provide services to them. We have also seen an increase in new Canadians who are coming to our drop in looking for supports and services. The increase in programming and meaningful activities has resulted in many of our community members staying most of the day in our drop in which has provided more opportunities for supports and potential referrals to other programs and services." - Program Staff

Most used tools
1. Administrative Statistics
2. Direct Observation
3. Interviews

Majority of data was reported as collected during the program.

Percentage of participants who experienced positive change by outcome, including the indicators with the lowest and highest reported positive change.

* Note: relative to the number of participants data was collected from. Most programs do not collect data from 100% of participants.

<table>
<thead>
<tr>
<th>Participants are supported in meeting their basic needs</th>
<th>62%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participants access nutritious food for themselves or their children</td>
<td>29%</td>
</tr>
<tr>
<td>Participants access resources that address safety</td>
<td>100%</td>
</tr>
</tbody>
</table>
Basic Needs Narrative

Agency: Edmonton John Howard Society
Program: Adult Support Services
Outcomes: Participants are supported in meeting their basic needs

Paul first accessed the Adult Support Services Program in August of 2014. He had recently been released from the Edmonton Remand Centre (ERC). While in ERC Paul had taken the workshops provided by the Edmonton John Howard Society (Financial Literacy, Pre-Release Planning, Communication, and Employment Preparation). The workshop facilitator referred Paul to our office. Paul had decided it was time to change his life around and needed some support while he got his life back in order. Paul was released with no clothing, money, or housing. On his first visit to our office Paul was provided with basic needs such as clothing, hygiene items, and bus tickets to get some more work clothing to assist him in his job search. He used our office on a daily basis for the month of August to apply for work by accessing our job board, client phone and fax machine. He was given ongoing support in his job search and was provided with clothing, work gear, hygiene items, and given various referrals to other community resources to assist him in his job search.

Although Paul struggled to initially make ends meet he informed staff that he had secured full time employment in a camp up north for the middle of September. He still holds the same job and still utilizes our office for his mail so is therefore able to keep in touch with staff and inform us of all his success. Paul is just one example of how hard work, perseverance, and a support system can make all the difference!

Average investment per participant for this program area is

$57.80

*This number is based on the total participants reported and the total amount of funding reported.
CHILDREN & YOUTH

Child & Youth programs seek to improve the lives of children and youth by meeting their developmental, social and basic needs. Parents may or may not be involved.

31 Programs
12,152,681 Funding
3635 Volunteers
180,576 Volunteer Hours

"I feel more confident. I speak more and share more now in group. I also share more in class. I would never have done that before. It feels good to participate. I’m not afraid to ask questions so I’m learning more." - Program Participant

Most used tools
1. Survey/Questionnaires
2. Group Discussions
3. Direct Observations

Majority of data was reported as collected during the program.

Percentage of participants who experienced positive change by outcome, including the indicators with the lowest and highest reported positive change.

* Note: relative to the number of participants data was collected from. Most programs do not collect data from 100% of participants.

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participants have developmentally appropriate skills</td>
<td>84%</td>
</tr>
<tr>
<td>Participants demonstrate age/developmentally appropriate skills in the following areas: personal/social skills, communication skills, gross motor skills, fine motor skills, appropriate problem solving skills, coping skills</td>
<td>84%</td>
</tr>
<tr>
<td>School-age participants demonstrate school readiness skills</td>
<td>92%</td>
</tr>
<tr>
<td><strong>Participants have improved family functioning</strong></td>
<td>65%</td>
</tr>
<tr>
<td>Participants report a positive change in their family’s routine (more structure &amp; stability, less chaos)</td>
<td>65%</td>
</tr>
<tr>
<td><strong>Participants increase their network of social support</strong></td>
<td>90%</td>
</tr>
<tr>
<td>Participants report (1) making new friends, or (2) maintaining friendships, through their involvement in the program (could be friends within the program or friends they make in community, with support from the program)</td>
<td>88%</td>
</tr>
<tr>
<td>Participants report making new social connections with peers in the program or in the broader community (through the program)</td>
<td>93%</td>
</tr>
</tbody>
</table>
Children & Youth Narrative

Agency: Norwood Child & Family Resource Centre
Program: Child and Youth Program
Outcomes: Children have developmentally appropriate skills
Participants increase their network of social support

Marie’s parents took the Parenting in Partnership (PiP) program through Norwood Centre in 2012. Through attending the Centre on PiP nights, Marie met the Child and Youth staff, and developed an interest in attending Planet Norwood. This was the after-school child and youth program at the time, and she began attending the program in January of 2013.

At the time, Marie was experiencing a very stressful home environment. Her parents were connected to a Family Support Worker through Norwood Centre, who advocated for the family and Marie consistently. When the Child and Youth Program transitioned out of an after-school recreation program framework in June of 2013, and moved into one to one/small group support, she was placed on the caseload of this writer, with the continuing support of the family’s Family Support Worker.

At this time Marie had been removed from her parent’s care and home, and placed into a group home. This was due to her increasing aggression towards her mother, and the parents consistently having to physically restrain her at home. Marie was visiting the principal’s office almost on a daily basis, and was running away from the group home during the week, and was constantly fighting with her peers.

This writer began to attend Marie’s school, focusing on classroom behavioral support, until a full-time educational assistant was assigned to her. After an EA was hired and attached to Marie, this writer would attend the school at lunch and eat with her. During these times, this writer and Marie would discuss an array of different subjects. Focusing on a strong connection to music, and particularly teaching Marie to use music as an emotional regulation tool, as well as diminish stress and manage anger. This writer facilitated numerous music therapy style activities, and Marie began to use her iPod as a tool during high stress times. This writer filled Marie’s iPod with a huge selection of different genre’s and types of artists, then would get Marie to listen to specific songs, artists, and genres, while describing and writing how they made her feel. Through this type of work, she was able to connect specifically to genres that calmed her, and also connected her to the memory of her grandmother who had passed away.

She also attended a workshop called Stress Lessons that was facilitated by the Child and Youth staff at Norwood. Through attending this group, Marie said “I learnt how to deal with my anger in a healthy way, and to use my Stress Box.” The Stress Box was a an actual box, decorated by Marie, where she could place stressful topics, and then sit down with this writer at a later time and discuss the topics. We could then figure out strategies on how to deal with them in a positive way.

Average investment per participants for this program area is $539.59

*This number is based on the total participants reported and the total amount of funding reported.
Marie has also attended other Child and Youth groups like Fill Your Bucket (a workshop around the power of positivity), Self-Esteem and Leadership, Self-Expression through Art, Photography Club, and Young Chefs (the Child and Youth cooking group). Through these opportunities to attend groups Marie said she learned how to make friends and how maintain those friendships.

Marie has a strong love and passion for being in the kitchen and cooking. She said that being able to attend the Young Chefs program allowed her to develop a stronger connection and love for cooking, following recipes, learning safety in the kitchen, and having fun cooking with her peers.

Marie and her mother said by being connected to the Child and Youth Program, and this writer, they have hugely improved their communication skills; Marie has improved her life skills, and cooking skills. In everyday routines Marie has learned a lot of emotional regulation strategies through her involvement with the Child and Youth Worker, for example, using music as a tool for calming herself down, stress box, Fill your Bucket and others mentioned above. This writer has seen a massive change in Marie’s behavior, and considers working with her and her family as a deep personal success. This writer is incredibly proud of the work that was accomplished with Marie. She has an amazing personality, and possesses an incredibly genuine nature. Marie is talented on so many levels, including her newly developed cooking skills, as well as a keen eye for photography and a keen ear for the power of music. Marie’s story is a prime example of the power of Child and Youth Work, and how every child is capable of success, no exceptions!

*Child and Youth Worker.*
COMMUNITY DEVELOPMENT

Engaging members of community to become involved and participate in community improvement and capacity building.

* 6 Programs
* $703,397 Funding
* 850 Volunteers
* 52,147 Volunteer Hours

"Participants from different cultural backgrounds reported that they enjoyed our multicultural performance and food, learned a lot from our training, and made new friends through our rich programs. Most of our participants are new immigrants. Through attending our activities, they felt less isolated and more cultural understanding."

- Program Staff

Participants are involved positively in the community 99%
Participants report that they feel a sense of belonging/citizenship in their community 94%
Participants report or demonstrate becoming more integrated into community activities or groups 100%
Participants have the skills needed to address identified issues 92%
Participants report having personal characteristics that are likely to help them address their identified issues such as resiliency, optimism, positive self-esteem, sense of meaning/purpose 89%
Participants report an increased capacity to solve day-to-day problems and challenges 94%
Participants increase their network of social support 97%
Participants report making new social connections with peers in the program or in the broader community 93%
Participants report (1) making new friends, or (2) maintaining friendships, through their involvement in the program (could be friends within the program or friends they make in community, with support from the program) 99%

Percentage of participants who experienced positive change by outcome, including the indicators with the lowest and highest reported positive change.

* Note: relative to the number of participants data was collected from. Most programs do not collect data from 100% of participants.

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participants are involved positively in the community</td>
<td>99%</td>
</tr>
<tr>
<td>Participants report that they feel a sense of belonging/citizenship in</td>
<td>94%</td>
</tr>
<tr>
<td>their community</td>
<td></td>
</tr>
<tr>
<td>Participants report or demonstrate becoming more integrated into</td>
<td>100%</td>
</tr>
<tr>
<td>community activities or groups</td>
<td></td>
</tr>
<tr>
<td>Participants have the skills needed to address identified issues</td>
<td>92%</td>
</tr>
<tr>
<td>Participants report having personal characteristics that are likely to</td>
<td>89%</td>
</tr>
<tr>
<td>help them address their identified issues such as resiliency, optimism,</td>
<td></td>
</tr>
<tr>
<td>positive self-esteem, sense of meaning/purpose</td>
<td></td>
</tr>
<tr>
<td>Participants report an increased capacity to solve day-to-day problems</td>
<td>94%</td>
</tr>
<tr>
<td>and challenges</td>
<td></td>
</tr>
<tr>
<td>Participants increase their network of social support</td>
<td>97%</td>
</tr>
<tr>
<td>Participants report making new social connections with peers in the</td>
<td>93%</td>
</tr>
<tr>
<td>program or in the broader community</td>
<td></td>
</tr>
<tr>
<td>Participants report (1) making new friends, or (2) maintaining</td>
<td>99%</td>
</tr>
<tr>
<td>friendships, through their involvement in the program (could be friends</td>
<td></td>
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<tr>
<td>within the program or friends they make in community, with support from</td>
<td></td>
</tr>
<tr>
<td>the program)</td>
<td></td>
</tr>
</tbody>
</table>

Most used tools

1. Surveys
2. Group Discussions
3. Interviews

Majority of data was reported as collected during the program.
| Participating communities strengthen their capacity to address issues or create opportunities for engagement | 95% |
| Participants’ communities create opportunities for people to get involved in issues/opportunities of interest to them | 93% |
| Participants identify how their communities (as a whole) are demonstrating progress in one or more of the following domains of community capacity: Participation; Leadership; Community structures; External supports; Asking why; Obtaining resources; skills, knowledge, and learning; Linking with others; Sense of community | 100% |

### Community Development Narrative

**Agency:** Action for Healthy Communities  
**Program:** Community Capacities  
**Outcomes:**  
- Participants increase their network of social support  
- Participating communities strengthen their capacity to address issues or create opportunities for engagement  
- Participants have skills required to address identified issues.  
- Participants are involved positively in the community

The “Black Diamond FC” is a soccer team for youth between the ages of 16-30, formed by the Ethiopian and Eritrean Communities. The group started their community initiative project with AHC in December, 2013. Their goals are to raise awareness of the effects of physical activities, to keep teens out of trouble, and to teach the youth about responsibility and leadership. The program developed rapidly with AHC’s support. Currently, their members have been increased from 26 at the beginning to 38 by the end of 2014. The team met twice a week to practice soccer skills, share the challenges the youth were facing, and discuss the effective strategies and practice to deal with the problems and issues in their life. They also organized many soccer tournaments for youth in order to facilitate their physical fitness and bring families together. Through all these activities, the program created supportive social networks and a meaningful life for youth that effectively prevented youth from high risk behaviors. For example, before participating in the program, there were six addicted youths. After joining the group, they actively participated in all team activities, and filled their life with fun, meaning, and strong support from the community. They were very grateful that the program made their lives different and helped them become totally new people.

Average investment per participant for this program area is **$159.68**  
*This number is based on the total participants reported and the total amount of funding reported.*
DISABILITY SUPPORT

Programs focused on supporting individuals with disabilities to overcome barriers.

4 Programs
$1,376,765 Funding
131 Volunteers
58 Volunteer Hours

"A major change has been seen at work with a high increase of conversation during their work day and especially during lunch hour, discussing and offering assistance with booking of transportation, support groups and daily living skills. Individuals also feel very comfortable asking staff for assistance in many aspects of daily living, including nutrition and problem solving which appears to be of most focus for them." - Program Staff

Most used tools
1. Interviews
2. Direct Observation
3. Review of progress documentation.

Majority of data was reported as collected post program participation.

Percentage of participants who experienced positive change by outcome, including the indicators with the lowest and highest reported positive change.

* Note: relative to the number of participants data was collected from. Most programs do not collect data from 100% of participants.

| Participants are involved positively in the community | 100% |
| Participants report that they feel a sense of belonging/citizenship in their community | 100% |
| Participants report or demonstrate being involved in groups or activities that support or assist with employment readiness or finding work (as applicable) | 100% |
| Participants have the skills needed to address identified issues | 45% |
| Participants demonstrate skills in one or more of the following areas: money management/financial, self-care, community involvement/socialization, self-advocacy, interpersonal/relationship, parenting, literacy, refusal skills, engaging in positive alternatives to negative (risky) behaviours, employment/career-related, leadership | 41% |
| Participants report an increased capacity to solve day-to-day problems and challenges (problem-solving skills) | 65% |
| Participants increase their network of social support | 62% |
| Participants report making new social connections with peers in the program or in the broader community (through the program) | 52% |
| Participants report that they have one or more new people that they turn to for help (may include program staff, other program participants, others in the community) | 100% |
Disability Support Narrative

Agency: Goodwill Industries
Program: Commercial Services (formerly Contract Services)
Outcomes: Participants have the skills needed to address identified issues
Participants increase their network of social support
Participants are involved positively in the community

Contract Services hosted their Black Tie Event, November 15th, in support of the United Way Fundraising Campaign. In addition to the campaign, we had two main goals to incorporate into the event. One, all individuals that work at Contract Services will be encouraged to host the event as their own and two, share their talents if they so choose. The individuals shared in an amazing day from start to finish. From food preparation and setup, to hosting specific areas such as admission, handing out of programs, hosting the dessert and candy bar (of which they assisted in preparation of) and seating. Pride of the event was shown throughout the day in their dress attire, smiles and most of all, their conversations with guests in attendance. The Event was emceed by one of the individuals and seven more shared their talents in the areas of singing, playing piano and poetry readings, of which he wrote. This day was incredible as we witnessed a confidence level within the individuals that had never before been seen. They truly enjoyed their day and were very proud of their accomplishments in all areas of the event. We presented a power point presentation to our guests at the end of the event. In the making of this presentation, we asked every individual to describe to us in one word what it meant to them to work at Contract Services....... our Wall of Inspiration (in our front foyer) reads with the following words: "comfortable"; "loyalty"; "happy"; "enjoyable"; "content"; "acceptance"; "fabulous"; "pleasure"; "awesome"; "fantastic"; "grateful"; "good"; and "hope".
Child focused programming aimed at enhancing early childhood development.

"Parents and caregivers report noticing a positive change in their children as a result of coming to the program, such as being more social and participating in group activities, or that they read more for themselves." - Program Staff

Percentage of participants who experienced positive change by outcome, including the indicators with the lowest and highest reported positive change.

* Note: relative to the number of participants data was collected from. Most programs do not collect data from 100% of participants.

| Children have developmentally appropriate skills | 93% |
| Participants demonstrate age/developmentally appropriate skills in the following areas: personal/social skills, communication skills, gross motor skills, fine motor skills, appropriate problem solving skills, coping skills | 92% |
| School-age participants demonstrate school readiness skills | 100% |
| Parents develop the (a) knowledge and (b) skills needed to provide a nurturing environment for their children | 93% |
| Parents identify healthy attachment behaviours | 90% |
| Parents report enhanced family interactions | 95% |
Early Childhood Narrative

Agency: Town of Gibbons
Program: Early Childhood Development Initiative - Sturgeon Region
Outcomes: Parents develop the knowledge and skills needed to provide a nurturing environment for their children
Participants access supports to meet their needs
Children have developmentally appropriate skills

When attending a group for new mothers we had several members of the group who wanted to get involved in our Rhythm and Rhyme program because they had noticed such a difference in the families they knew that had taken part. They saw better language skills in the children and more confidence in the parents. These mothers did join our Rhythm and Rhyme session and all reported feeling increased confidence, having better tools to promote early literacy and we even had one mom who felt better able to sooth her baby after her participation. Another parenting group filled with parents who had moved to the region due to their spouse’s work reported feeling lost in knowing what services and programs were available to their family in our region. Through our time together and future contact we were able to connect them with the resources they needed to best support their families. Several parents have expressed how much they look forward to the Ages and Stages Questionnaires to help them discover what the developmental milestones are for each age and how they as parents can support their child’s development. They also appreciate the help in finding local resources that enable them to get their child the help they need in their own communities. We have several families that have reported what a difference it has made that we were able to help them to access Early Childhood programs that they could not otherwise afford to be a part of.

Average investment per participant for this program area is $382.59
*This number is based on the total participants reported and the total amount of funding reported.
FAMILY SUPPORT

Programming focused on caregivers and/or families with the intention of improving family well-being.

31 Programs
$10,129,127 Funding
1104 Volunteers
26,290 Volunteer Hours

"I know I have grown as a parent and have grown as a person. Becoming involved with [organization] has helped in many ways (mentally, physically in a way for safety, and a lot emotionally)." - Program Participant

<table>
<thead>
<tr>
<th>Age Range</th>
<th>Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-17</td>
<td>3,033</td>
</tr>
<tr>
<td>18-64</td>
<td>17,863</td>
</tr>
<tr>
<td>65+</td>
<td>4,120</td>
</tr>
</tbody>
</table>

Participants feel supported 89%
Participants report having close friends and/or close relatives with whom they can confide/receive advice 84%
Participants report feeling (1) heard/understood and (2) that their needs were met, by program staff, volunteers and/or other participants 93%
Participants have improved family functioning 82%
Participants report increased positive interactions among family 81%
Participants report doing more activities together as a family 89%
Participants increase their network of social support 88%
Participants report that they have one or more new people that they turn to for help (may include program staff, other program participants, others in the community) 86%
Participants report (1) making new friends, or (2) maintaining friendships, through their involvement in the program (could be friends within the program or friends they make in community, with support from the program) 91%

Majority of data was reported as collected during the program.

*Note: relative to the number of participants data was collected from. Most programs do not collect data from 100% of participants.

Most used tools
1. Surveys/Questionnaires
2. Review documents of participant progress
3. Interviews

31 Programs
$10,129,127 Funding
1104 Volunteers
26,290 Volunteer Hours
This success story is about three sisters; the oldest is 4 years old, and the other 2 are 2.5 years old twins. Their mother is a single mom; they immigrated to Canada 8 months ago. It all began when the mother saw our Playschool Director outside of the playschool and heard her speak her language. She was thrilled to hear her language and approached the Playschool Director and asked if she can tell her story and she started crying. The Director asked her to come inside so they could talk. She began telling the Director that she is in Canada by herself, does not speak English and she doesn’t know how to cope. She started saying how lonely she is and she doesn’t know anybody. The Playschool Director told her not to worry and everything will be solved.

First, CAFA registered her children in the CAFA Playschool for the mornings, and then helped registering them in the daycare next door for the afternoon. After that, CAFA’s Family Liaison talked to the mom’s social worker so she could assist to register her in the English Language class.

A week later, the mom started going to school and the girls started attending CAFA playschool during the morning and the daycare next to CAFA during the afternoon. The Playschool Director checked on them at the daycare regularly and translated as necessary. CAFA brought a speech pathologist that comes twice a week to work with each of the girls individually to help them improve.

The mom needed some help going to see a doctor, so CAFA arranged for the Family Liaison to take her to the doctor and translated for her about her feelings of depression, loneliness, and frustration. CAFA also helped her by buying her some food and clothes for her children because, although she receives welfare benefits, her rent is expensive.

After four months, the children have improved in speaking the English language, as well as in their skills whether it is social, physical, or intellectual.

The mom is trying her best to learn English so she can help her girls. We will continue working together with the mom and children to get the best results for them.
Programs focused on prevention of FASD and/or support to families with parents or children affected by FASD.

4 Programs
$1,876,626 Funding
0 Volunteers
0 Volunteer Hours

"I liked all of the supports in the program. I really felt cared for and that I deserved to have my kids and be a parent to them. This program saved my life." - Program Participant

<table>
<thead>
<tr>
<th>Participants who experienced positive change by outcome, including the indicators with the lowest and highest reported positive change.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participants are connected to community resources</td>
</tr>
<tr>
<td>Participants report that they have used the resources/services of one or more community resources that address their information or service needs</td>
</tr>
<tr>
<td>Participants report that they have contacted one or more community resources that address their information or service needs</td>
</tr>
<tr>
<td>Participants feel supported</td>
</tr>
<tr>
<td>Participants report having sources of community or professional support in which they can confide/receive advice</td>
</tr>
<tr>
<td>Participants report feeling (1) heard/understood and (2) that their needs were met, by program staff, volunteers and/or other participants</td>
</tr>
<tr>
<td>Participants increase their network of social support</td>
</tr>
<tr>
<td>Participants report (1) making new friends, or (2) maintaining friendships, through their involvement in the program (could be friends within the program or friends they make in community, with support from the program)</td>
</tr>
<tr>
<td>Participants report that they have one or more new people that they turn to for help (may include program staff, other program participants, others in the community)</td>
</tr>
</tbody>
</table>

Most used tools
1. Surveys/Questionnaires
2. Interviews
3. Standardized tools

Majority of data was reported as collected during the program.
Two agencies working together to support a PCAP participant and her partner creating an outcome that was unexpected by other supports. It demonstrates how important it can be to provide supports to the whole family. This particular family has experienced CFS (Children and Family Services) involvement with different members and possibly generational. This couple had continued to meet and consistently complete tasks set in collaboration with their supports. They would experience barriers that impeded progress yet kept with the program and accepted their circumstances, thus continuing to show their resolve and acceptance of the support offered. It was observed, when the child was returned to this couple, that this was a new outcome for the family and demonstrated how well-placed supports are important. It reflected the collaboration, supports and efforts put forward by everyone involved.
**Head Start**

Programs promote school readiness by enhancing child development and engaging parents in their child’s learning.

- 5 Programs
- $3,458,423 Funding
- 241 Volunteers
- 6888 Volunteer Hours

"Children are much more socially mature, able to put on and do up outdoor clothing to go outside, following directions and listening skills improved a great deal. Children can write and spell own name, know first and last names, colour and number recognition." - Program Staff

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**Percentage of participants who experienced positive change by outcome, including the indicators with the lowest and highest reported positive change.**

*Note: relative to the number of participants data was collected from. Most programs do not collect data from 100% of participants.*

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children have developmentally appropriate skills</td>
<td>81%</td>
</tr>
<tr>
<td>Participants demonstrate age/developmentally appropriate skills in the following areas: personal/social skills, communication skills, gross motor skills, fine motor skills, appropriate problem solving skills, coping skills</td>
<td>92%</td>
</tr>
<tr>
<td>School-age participants demonstrate school readiness skills</td>
<td>100%</td>
</tr>
<tr>
<td>Parents develop the (a) knowledge and (b) skills needed to provide a nurturing environment for their children</td>
<td>97%</td>
</tr>
<tr>
<td>Parents model healthy attachment behaviours during the program</td>
<td>92%</td>
</tr>
<tr>
<td>Parents identify aspects of a nurturing environment for their child(ren) at home</td>
<td>100%</td>
</tr>
<tr>
<td>Participants access support to meet their needs</td>
<td>78%</td>
</tr>
<tr>
<td>Participants report that they have one or more new people that they turn to for help (may include program staff, other program participants, others in the community)</td>
<td>77%</td>
</tr>
<tr>
<td>Participants report seeking out relevant resources</td>
<td>100%</td>
</tr>
</tbody>
</table>

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**Most used tools**

1. Survey/Questionnaires
2. Standardized tools

Majority of data was reported as collected post program participation.
Head Start Narrative

Agency: Bent Arrow Traditional Healing Society
Program: White Cloud Head Start
Outcomes: Parents develop the knowledge and skills needed to provide a nurturing environment for their children. Participants access support to meet their needs. Children have developmentally appropriate skills.

We heard some positive feedback from one of our partners. A kindergarten teacher at Sherwood school told us she could tell which of her students were in our program as they were right up to where they needed to be in class. They knew how to line up, dress and undress themselves, knew their colors, knew their numbers and she was pleasantly surprised at how many of them could write their first names. The extra help of Head Start helped the children to be able to jump right into regular programing, which is not always the case when children start school. We also supported and became cheerleaders by encouraging one of our single parents to challenge herself. She was working retail with limited prospects and we encouraged her to return to school. We assisted her with resources on schools, funding, daycares and day homes. She enrolled in the Legal Administrative Assistant Program where she is now excelling in and will be completing in the spring of 2015. Mom has stated that she would never have returned to school without the support and encouragement of the Head Start staff. The staff was available to help her when she was feeling overwhelmed, needed someone to talk to and/or needed the help with accessing resources.

Average investment per participant for this program area is 

$1,684.57

*This number is based on the total participants reported and the total amount of funding reported.
HOME VISITATION

Services that promote healthy parent-child relationships and the best possible outcomes for vulnerable families.

# 13 Programs
$ 4,189,420 Funding
5 Volunteers
13 Volunteer Hours

"For many of our parents we help them to understand that their cultural ways of interacting with their children are often very appropriate for their child's development level. We work to give them confidence in what they are naturally doing." - Program Staff

Most used tools
1. Survey/Questionnaires
2. Direct Observation
3. Review of progress reports

Majority of data was reported as collected during the program.

<table>
<thead>
<tr>
<th>Percentage of participants who experienced positive change by outcome, including the indicators with the lowest and highest reported positive change. * Note: relative to the number of participants data was collected from. Most programs do not collect data from 100% of participants.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Parents have positive parenting skills</strong></td>
</tr>
<tr>
<td>Parents model positive parenting strategies learned during the program</td>
</tr>
<tr>
<td>Parents identify strategies to apply in one or more of the following areas: helping their children develop age-appropriate skills; providing positive feedback to children; addressing children’s behaviour challenges; setting boundaries</td>
</tr>
<tr>
<td><strong>Participants have knowledge of child development</strong></td>
</tr>
<tr>
<td>Parents identify the developmental stages that can be expected of their child in relation to: Communication, Physical development, Attention, Focus</td>
</tr>
<tr>
<td>Parents/caregivers identify activities that are appropriate for their child(ren)’s development</td>
</tr>
<tr>
<td><strong>Participants have the skills needed to address identified issues</strong></td>
</tr>
<tr>
<td>Participants report being able to cope with day-to-day stress</td>
</tr>
<tr>
<td>Participants report having personal characteristics that are likely to help them address their identified issues such as resiliency, optimism, positive self-esteem, sense of meaning/purpose</td>
</tr>
</tbody>
</table>

Participants

<table>
<thead>
<tr>
<th>Age Range</th>
<th>Number of Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-17</td>
<td>1,128 (52%)</td>
</tr>
<tr>
<td>18-64</td>
<td>1,200 (52%)</td>
</tr>
<tr>
<td>65+</td>
<td>0 (0%)</td>
</tr>
</tbody>
</table>

Most used tools

1. Survey/Questionnaires
2. Direct Observation
3. Review of progress reports

Volunteer Hours by Age Range

<table>
<thead>
<tr>
<th>Age Range</th>
<th>Number of Volunteers</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-17</td>
<td>250 (52%)</td>
</tr>
<tr>
<td>18-64</td>
<td>250 (52%)</td>
</tr>
<tr>
<td>65+</td>
<td>0 (0%)</td>
</tr>
</tbody>
</table>

Volunteer Hours by Age Range

<table>
<thead>
<tr>
<th>Age Range</th>
<th>Number of Volunteer Hours</th>
</tr>
</thead>
<tbody>
<tr>
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<td>250 (52%)</td>
</tr>
<tr>
<td>18-64</td>
<td>250 (52%)</td>
</tr>
<tr>
<td>65+</td>
<td>0 (0%)</td>
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</tbody>
</table>

Participants

<table>
<thead>
<tr>
<th>Immigrant</th>
<th>Aboriginal</th>
<th>Total Sum Unique</th>
</tr>
</thead>
<tbody>
<tr>
<td>1,034</td>
<td>1,147</td>
<td>2,181</td>
</tr>
<tr>
<td>0-17</td>
<td>1,128</td>
<td>2,256</td>
</tr>
<tr>
<td>18-64</td>
<td>1,200</td>
<td>2,400</td>
</tr>
<tr>
<td>65+</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

Percentage of participants who experienced positive change by outcome, including the indicators with the lowest and highest reported positive change.
<table>
<thead>
<tr>
<th>Percentage of participants who experienced positive change by outcome, including the indicators with the lowest and highest reported positive change.</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Participants increase their network of social support</td>
<td>79%</td>
</tr>
<tr>
<td>Participants report (1) making new friends, or (2) maintaining friendships, through their involvement in the program (could be friends within the program or friends they make in community, with support from the program)</td>
<td>70%</td>
</tr>
<tr>
<td>Participants report that they have one or more new people that turn to for help (may include program staff, other program participants, others in the community)</td>
<td>95%</td>
</tr>
</tbody>
</table>

* Note: relative to the number of participants data was collected from. Most programs do not collect data from 100% of participants.

---

**Home Visitation Narrative**

**Agency:** Healthy Families Healthy Futures Society  
**Program:** Healthy Families Healthy Futures Home Visitation  
**Outcomes:**  
- Participants have the skills needed to address identified issues  
- Participants increase their network of social support  
- Participants have knowledge of child development  
- Parents have positive parenting skills

I met the family after they completed a rehabilitation program for drug use. The parents met in the program and the mom became pregnant before they completed it. Both parents were concerned with their ability to be successful parents as well as with relapsing. The mom reported to me at one time that the only reason she was “clean” was the pregnancy. She feared what she may do after the baby was born.

The mom and I visited for 5 years. In that time we watched and encouraged her son at each milestone. He had some physical delays and was diagnosed with a disease he inherited from his mother. We attended specialist appointments at the University Hospital yearly and were reassured by doctors that it was unlikely he would have symptoms from this debilitating disease. He would be a carrier and may pass it on to his children. The mom was not so fortunate – she had 1 surgery that left her with nerve damage.

The family had excellent extended family support and with assistance, the family purchased a small home. The father had difficulty at first finding work he enjoyed that could support his family. The mother worked part time jobs and used the Food Bank to assist the family. Both parents had relapses regarding drug use but were able to get the assistance they needed to move past it.

This was 5 years ago. I met the mother in the local dollar store at the beginning of May 2015. She hugged me and stated how good it was to see me. She was bursting at the seams to let me know how she and her family were doing. Her son is now 10 years old, enjoys school and plays soccer on the local team. The family just sold their “starter home” and have purchased a big, beautiful home across from their son’s school. The father has steady work which he loves. The mother had another surgery which involved amputation of her foot. She stated it was the “best thing ever” as she no longer suffers with pain and doesn’t feel the need to hide her foot from others because it looked different.

This is one family’s story. I feel privileged and proud to have been able to play a part in this family’s journey. Thanks HFHF!

---

**Average investment per participant for this program area is**

$1,681.82

*This number is based on the total participants reported and the total amount of funding reported.*
Information & Referral

Programs that identify needs and refer individuals to community resources.

11 Programs
$3,701,187 Funding
2,324 Volunteers
18,944 Volunteer Hours

"Participants report they have been provided with information on; and resources for mental health and mental illness they were not previously aware of. - Program Staff

Most used tools
1. Survey/Questionnaires
2. Administrative Statistics
3. Interviews

Majority of data was reported as collected during the program.

Percentage of participants who experienced positive change by outcome, including the indicators with the lowest and highest reported positive change.

* Note: relative to the number of participants data was collected from. Most programs do not collect data from 100% of participants.

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participants access support to meet their needs</td>
<td>82%</td>
</tr>
<tr>
<td>Participants report seeking out relevant resources</td>
<td>81%</td>
</tr>
<tr>
<td>Participants report they accessed services that met their needs</td>
<td>97%</td>
</tr>
<tr>
<td>Participants feel supported</td>
<td>89%</td>
</tr>
<tr>
<td>Participants report having sources of community or professional support</td>
<td>30%</td>
</tr>
<tr>
<td>in which they can confide/receive advice</td>
<td></td>
</tr>
<tr>
<td>Participants report feeling (1) heard/understood and (2) that their</td>
<td>94%</td>
</tr>
<tr>
<td>needs were met, by program staff, volunteers and/or other participants</td>
<td></td>
</tr>
<tr>
<td>Participants have knowledge of community resources</td>
<td>82%</td>
</tr>
<tr>
<td>Participants ask for information about or referral to one or more</td>
<td>81%</td>
</tr>
<tr>
<td>community resources that address their information or service needs</td>
<td></td>
</tr>
<tr>
<td>Participants identify one or more specific community resources that</td>
<td>94%</td>
</tr>
<tr>
<td>address their information or service needs.</td>
<td></td>
</tr>
</tbody>
</table>
A middle aged woman called the Distress Line recently, to help her avoid calling her abusive ex-boyfriend. We learned that the woman, whom we’ll call Cheryl, had broken up with her boyfriend several months ago after reaching her limits in the relationship. Cheryl was with her boyfriend for over three years and during that time he put her down, he discouraged her from pursuing her dreams of becoming a writer, and just before Christmas this year he began showing increasingly controlling behavior over her. When he demanded that they get married, “or else...” she ended the relationship. She shared that since that time she has felt very alone, and that when she feels alone she is tempted to call her ex to rekindle things, even though she knows it’s not a safe thing for her to do.

Cheryl talked for a long time with our volunteer about the dynamics of abuse, and the volunteer normalized her feelings of grief over the loss of her relationship – even though it wasn’t always a healthy relationship, Cheryl still misses the good times she shared with her ex. The volunteer also spoke with Cheryl about how she could cope with feeling lonely, and cope with the symptoms of anxiety which were also identified during the call. Cheryl ended her Distress Line call with a list of Internal Resources – things she could do for herself, by herself, as well as a plan to talk with her psychologist about what’s been happening for her recently. Cheryl was feeling really positive at the end of the call, sharing plans to go back to school to pursue her goal of becoming a writer. In an hour, Cheryl went from feeling isolated and lonely to feeling empowered and hopeful for her future.
**Parent Education**

Programs that focus on enhancing parent/caregiver practices and behaviors and increase knowledge of age appropriate child and youth development.

- **9 Programs**
- **$1,730,156 Funding**
- **497 Volunteers**
- **21,150 Volunteer Hours**

"It has helped give me confidence in being a young parent. They've taught me how to be a better parent to my kids." - Program Participant

**Most used tools**
1. Surveys/Questionnaires
2. Review documentation of progress
3. Administrative Statistics

Majority of data was reported as collected during the program.

| Percentage of participants who experienced positive change by outcome, including the indicators with the lowest and highest reported positive change. |
|---|---|
| Parents develop the (a) knowledge and (b) skills needed to provide a nurturing environment for their children | 92% |
| Parents identify strategies they can apply at home, to providing a nurturing environment for their child(ren) | 89% |
| Parents report enhanced family interactions | 96% |
| **Participants access support to meet their needs** | 81% |
| Participants report seeking out relevant resources | 69% |
| Participants report referrals provided were relevant to meet their needs | 99% |

* Note: relative to the number of participants data was collected from. Most programs do not collect data from 100% of participants.

**Age Range**

- 0-17: 48%
- 18-64: 50%
- 65+: 2%

**Participants**

- Immigrant: 7458
- Aboriginal: 4127
- Total Sum Unique: 362
Amy started school at Braemar School in September, after just giving birth to her second son. She did not know many people at school but developed a connection with the Educational Support Services (ESS) Support Worker. She was encouraged to attend the Parenting Program to meet some other young parents.

Amy was successful at meeting new friends, she even encouraged others she met to attend the Parenting Program. She eagerly enjoyed sharing stories and tips of her own parenting style and experiences. It was clear she not only provided valuable insights but deepened her knowledge about parenting strategies from her peers and the facilitator during the first half of each parenting session. Some of the topics she found most helpful to learn and discuss were positive discipline, healthy attachment and nutrition. Amy connected with a dietician and made an appointment with the community dietician to chat about serving sizes and healthy eating on a budget for her family.

During the second half of the group Amy was able to spend some quality time with her son doing a new activity with him each week. She said that “time was important to her because she was able to bond with her son and better understand how to apply what she learned to further contribute to her son's development.”

Not only was this young parent able to make new friends with other moms her age, she was able to enhance her confidence as a parent and familiarize herself with other community resources.
A network of resource centres serving parents, caregivers and children.

11 Programs
$5,147,856 Funding
290 Volunteers
3,694 Volunteer Hours

"[Program participants] demonstrated ability to deal with challenging behaviour of children and when to use various strategies such as time out; ability to select age appropriate games and stories; and an increased ability to listen and engage in conversation with children." - Program Staff

**Most used tools**
1. Survey/Questionnaires
2. Direct Observations
(Only 2 reported)

Majority of data was reported as collected during the program.

<table>
<thead>
<tr>
<th>Percentage of participants who experienced positive change by outcome, including the indicators with the lowest and highest reported positive change. *Note: relative to the number of participants data was collected from. Most programs do not collect data from 100% of participants.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Parents have positive parenting skills</strong></td>
</tr>
<tr>
<td>Parents identify strategies to apply in one or more of the following areas: helping their children develop age-appropriate skills; providing positive feedback to children; addressing children’s behaviour challenges; setting boundaries</td>
</tr>
<tr>
<td>Parents model positive parenting strategies learned during the program</td>
</tr>
<tr>
<td><strong>Participants feel supported</strong></td>
</tr>
<tr>
<td>Participants report having close friends and/or close relatives with whom they can confide/receive advice</td>
</tr>
<tr>
<td>Participants report having sources of community or professional support in which they can confide/receive advice</td>
</tr>
<tr>
<td><strong>Participants have knowledge of child development</strong></td>
</tr>
<tr>
<td>Parents identify the developmental stages that can be expected of their child in relation to: Communication, Physical Development, Attention, Focus</td>
</tr>
<tr>
<td>Parents/caregivers identify activities that are appropriate for their child(ren)’s development</td>
</tr>
<tr>
<td><strong>Participants have knowledge of community resources</strong></td>
</tr>
<tr>
<td>Participants ask for information about or referral to one or more community resources that address their information or service needs</td>
</tr>
<tr>
<td>Participants identify one or more specific community resources that address their information or service needs</td>
</tr>
</tbody>
</table>
Agency: KARA Family Resource Centre
Program: The KARA Program
Outcomes: Participants feel supported
- Participants have knowledge of child development
- Participants have positive parenting skills
- Participants have knowledge of community resources

A young family made remarkable improvements during one of our longest run programs by working tirelessly and making every effort in keeping their daughter. Children Services had apprehended a young child with developmental delays from her parents when she was around 13 months of age. When the family began the program, their daughter could not walk, talk, stand, and wasn’t eating properly. Her parents, both of whom lived outside of Edmonton, travelled extensively in order to attend the KARA program; one travelling for over 4 hours a day, twice a week, the other, flying in from Ontario. The parents learned just how crucial a child’s development is and began implementing strategies right away to help their child. The skills they learned help them role model positive behavior, give positive feedback, and bond with their child. Their child quickly learned how to stand and walk with assistance with KARA staff members and eventually with her parents. Her fine motor skills also improved as she learned proper eating habits and even began speaking a few words! During the program, the parents were able to access their child during the day, and then began having overnight visits, eventually gaining custody of their child again.

Average investment per participant for this program area is

$381.63

*This number is based on the total participants reported and the total amount of funding reported.
PREVENTION OF FAMILY VIOLENCE & BULLYING

Focus on education, prevention and support to individuals and/or families in the area of abuse, domestic violence and/or bullying.

- 9 Programs
- $3,713,917 Funding
- 279 Volunteers
- 13,157 Volunteer Hours

"The friendships and connections this program creates are identifiable through participants' interactions with each other, both inside and outside of structured time. Everyone is courteous and respectful of their peers and the sense of support this program promotes extends beyond the structure of the program as the participants take steps to check in with each other even outside of time dedicated to this program." - Program Staff

Most used tools
1. Survey/Questionnaires
2. Direct Observations
3. Standardized tools

Majority of data was reported as collected during the program.

<table>
<thead>
<tr>
<th>Participants who experienced positive change by outcome, including the indicators with the lowest and highest reported positive change.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participants feel supported 93%</td>
</tr>
<tr>
<td>Participants report feeling (1) heard/understood and (2) that their needs were met, by program staff, volunteers and/or other participants 92%</td>
</tr>
<tr>
<td>Participants report having sources of community or professional support in which they can confide/receive advice 100%</td>
</tr>
<tr>
<td>Participants have the skills needed to address identified issues 85%</td>
</tr>
<tr>
<td>Participants report being able to cope with day-to-day stress 84%</td>
</tr>
<tr>
<td>Participants report having personal characteristics that are likely to help them address their identified issues such as resiliency, optimism, positive self-esteem, sense of meaning/purpose 100%</td>
</tr>
<tr>
<td>Participants increase their network of social support 97%</td>
</tr>
<tr>
<td>Participants report (1) making new friends, or (2) maintaining friendships, through their involvement in the program (could be friends within the program or friends they make in community, with support from the program) 97%</td>
</tr>
<tr>
<td>Participants report that they have one or more new people that they turn to for help (may include program staff, other program participants, others in the community) 97%</td>
</tr>
</tbody>
</table>
Percentage of participants who experienced positive change by outcome, including the indicators with the lowest and highest reported positive change.

* Note: relative to the number of participants data was collected from. Most programs do not collect data from 100% of participants.

| Participants make informed choice about their living situation | 87% |
| Participants report they have information about the options and resources available to them | 83% |
| Participants report they have the capacity to decide amongst the options and resources available to them (in other words - they understand the information and how it could apply to their situation, feel they have the ‘tools’ to make the right decision) | 98% |

Prevention of Family Violence & Bullying Narrative

Agency: Today Family Violence Help Centre
Program: Family Violence Victim Short-term Integrated Support Program
Outcomes: Participants have the skills needed to address identified issues
Participants increase their network of social support
Participants feel supported

Whenever I tell others about my experience with Family Violence, I tell them about how the isolation was the worst part of it all. I found that even after escaping the violent relationship, I was haunted by the overwhelming feeling of loneliness and vulnerability. Those feelings paralyzed me, and made me worried that no one would believe what I had to say.

The Today Centre has really helped me with my recovery and reminded me that the emotional rollercoaster, the heartbreak and the “should’ve, would’ve could’ve” were normal occurrences. My worker also assured me that these thoughts and feelings didn’t make me weak or stupid, which I needed to hear! I felt empowered again and that my brain could finally realize there were others around me that believed in me and knew I could move forward from this negative experience. The biggest impact the Today Centre has had on me was the message that “It Starts Today” which came in the form of resources, information, contact numbers and knowledge. As someone who was extremely embarrased at first to have been in an abusive relationship, the last thing I wanted was for a worker to feel sorry for me, because I already felt ashamed and guilty as it was.

By receiving resources, I could make my own choices for what was best for me and my son. The gift of empowerment is what my worker gave me and for that I am grateful. While in the abusive relationship, my abuser told me that voicing my concerns or taking action for myself was being selfish. However, while battling to regain normalcy in my life and my son’s life, I have come to terms with the fact that there is absolutely nothing wrong with expressing ones emotions, and having control over the decisions made in my own life. I was reminded that I was smart, intuitive and capable of moving forward. I also learned that this relationship didn’t define who I really was as a partner, mother, friend and human being. At the Today Centre I felt safe to learn from my mistakes, and to be patient with the many changes rushing through me. I felt safe to ask for help and support in any decision I made. I cannot express enough, how thankful I am to be given the opportunity to feel peace and calm again. I couldn’t have gotten to this point without the support of the Today Centre, my friends and family. Be patient with yourself, allow people to help, and remind yourself that you deserve to have a normal life. It is not too much to ask for and it does not make you selfish. Things are never going to be easy, but it doesn’t mean that you are alone!
PUBLIC EDUCATION

Programs focused on dissemination of information regarding issues affecting individuals, families and community.

7 Programs
$1,473,772 Funding
192 Volunteers
6,912 Volunteer Hours

"At the end of the youth workshop, youth identified people or places they could go for help if they or a friend was experiencing violence. We received a variety of responses including family (parents, siblings, aunts, uncles, grandparents, cousins), friends, counsellors, social worker, and the Kids Help Phone." - Program Staff

Most used tools
1. Survey/Questionnaires
2. Administrative Statistics
3. Direct Observation

Majority of data was reported as collected post program participation.

Percentage of participants who experienced positive change by outcome, including the indicators with the lowest and highest reported positive change.

* Note: relative to the number of participants data was collected from. Most programs do not collect data from 100% of participants.

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participants are educated about social issues in the community</td>
<td>91%</td>
</tr>
<tr>
<td>Participants identify ways they could get involved in addressing one or more of the above issues, if interested</td>
<td>86%</td>
</tr>
<tr>
<td>Participants identify at least one type of community resource to address one or more of the above issues (as relevant to their concern or interest)</td>
<td>95%</td>
</tr>
<tr>
<td>Participants have knowledge of community resources</td>
<td>85%</td>
</tr>
<tr>
<td>Participants ask for information about or referral to one or more community resources that address their information or service needs</td>
<td>65%</td>
</tr>
<tr>
<td>Participants identify one or more specific community resources that address their information or service needs</td>
<td>86%</td>
</tr>
</tbody>
</table>
The Sexual Assault Center of Edmonton’s Public Education department facilitates workshops and information sessions on sexual assault and related topics to people of all ages throughout the community. Each of our presentations is catered in content, length, and language to meet the specific needs of participants. In addition to information delivery we also consult with organizations supporting survivors in some capacity; this can be nurses or doctors helping their patients, law enforcement serving their clients, and often, school staff supporting their students.

In the spring of 2014 SACE’s Public Education team received a request for assistance from a local high school. The administration of this high school reached out to our Centre after a number of their students were sexually abused by someone very close to the school community. The administration was anxiously seeking support as they could see that the abuse was having a serious impact on both the individual students as well as the school community as a whole. Our Public Education team immediately set up a time to meet with the staff in order to determine their best course of action in supporting their students, and to determine how SACE could best support them in this process.

After consultation with the staff it was determined that the school had 2 primary goals: to provide information on the issue of sexual assault and community resources, like SACE, to every student in the school, and to increase the capacity of school staff to support the survivors in their school community. In order to achieve the first goal our Public Education team scheduled time to facilitate presentations on sexual assault to the entire school (a total of over 700 students). In order to achieve the second goal we arranged to hold a separate education session for all school staff on the topic of supporting survivors of sexual violence.

The sessions for the students went very well; our Public Education team designed a session that educated the students on definitions of sexual assault and consent in Canada, on common sexual assault myths, on community resources survivors can access for help, and on how to support someone who has experienced sexual violence. The session for the school staff went equally as well, with many people expressing gratitude for having a presentation that focused specifically on how to support youth and respond to disclosures of abuse. Our Public Education team also created a document for the school staff to help them facilitate ongoing conversations about sexual violence with their students.

Our immediate, post presentation evaluations indicated that the vast majority of both adult and youth participants reported having a better understanding of the issue of sexual assault, a better understanding of how to support individuals who experience sexual assault, and a better understanding of community resources available to help survivors.
In the months that followed, the school administration reported back to our Public Education team that the presentations had created an ongoing conversation around the issue of sexual violence among staff and students. A number of the impacted students also decided to access counselling services at SACE. As a result of the information sessions we were also invited to facilitate presentations at a number of other youth serving community organizations.

It is well documented that receiving community support is essential in the healing journey of survivors of sexual assault. For youth, this often includes receiving support and understanding from both the staff and students in their school community. In being able to consult with the administration we were able to cater our services to best meet the needs of the survivors within this specific organization. We were able to respond to their short term needs by providing information on sexual assault and SACE services, and to their long term needs by increasing the capacity of school staff to support their student population; together this creates an environment where survivors are believed and supported. This story serves as a powerful example of how public education services can create communities that are able to respond to abuse in a supportive, non-victim blaming way, and in a way that reduces the impacts of trauma and empowers survivors to heal.
SENIORS SUPPORT

Programs focused on seniors’ care, support and outreach.

# 19 Programs
$ 3,433,626 Funding
♀ 2013 Volunteers
.Timer 147,957 Volunteer Hours

"Participant relationships become very strong, and they begin to support each other outside of the activities, such as sharing information about services and resources, and helping each other during times of illness or difficult life moments." - Program Staff

![Participants and Age Range Chart]

<table>
<thead>
<tr>
<th>Most used tools</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Survey/Questionnaires</td>
</tr>
<tr>
<td>2. Interviews</td>
</tr>
<tr>
<td>3. Administration statistics</td>
</tr>
</tbody>
</table>

Majority of data was reported as collected during the program.

### Percentage of participants who experienced positive change by outcome, including the indicators with the lowest and highest reported positive change.

*Note: relative to the number of participants data was collected from. Most programs do not collect data from 100% of participants.*

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Participants are connected to community resources</strong></td>
<td>97%</td>
</tr>
<tr>
<td>Participants report that they have contacted one or more community resources that address their information or service needs</td>
<td>96%</td>
</tr>
<tr>
<td>Participants report that they have used the resources/services of one or more community resources that address their information or service needs</td>
<td>98%</td>
</tr>
<tr>
<td><strong>Participants increase their network of social support</strong></td>
<td>86%</td>
</tr>
<tr>
<td>Participants report that they have one or more new people that they turn to for help (may include program staff, other program participants, others in the community)</td>
<td>85%</td>
</tr>
<tr>
<td>Participants report (1) making new friends, or (2) maintaining friendships, through their involvement in the program (could be friends within the program or friends they make in community, with support from the program)</td>
<td>87%</td>
</tr>
<tr>
<td><strong>Participants make informed choice about their living situation</strong></td>
<td>83%</td>
</tr>
<tr>
<td>Participants access the options and resources available to them</td>
<td>17%</td>
</tr>
<tr>
<td>Participants report they have the capacity to decide amongst the options and resources available to them (in other words - they understand the information and how it could apply to their situation, feel they have the ‘tools’ to make the right decision)</td>
<td>99%</td>
</tr>
</tbody>
</table>
Seniors Narrative

Agency: Northwest Edmonton Seniors Society
Program: Outreach and Wellness
Outcomes: Participants increase their network of social support
Participants are connected to community resources
Participants make informed choices about their living situation

In 1999 Bob and Mary moved to the Calder area. They were new to the neighborhood and after a year of trying to find a place where they could both socialize and enjoy recreational activities they could not make this connection. Feeling increasingly lonely and isolated, they decided to try attending North West Edmonton Seniors (formerly Calder Seniors).

Bob who just turned 95 and Mary who is 91 reflected on how their lives might have turned out if they had not found the Centre. Immediately upon entering the Centre they felt welcomed and soon strong social bonds were formed. The Centre had many activities to offer that they both enjoyed. Although they were actively involved with other programs at the Center in 2000 a group of 18 musicians came together to "jam" on Wednesdays in the Centre's lounge. With their love of music and dancing Bob and Mary alone danced among the tables. Soon the lounge could not accommodate the large audience of spectators. The jam session moved down to the hall area. Bob reports that at first he and Mary danced solo while the audience looked on. Through encouragement and asking others to dance with them the dance floor was soon full.

Word spread quickly throughout the City that North West Seniors had the best Jam Session and dance every Wednesday afternoon. At this time Bob and Mary were asked to act as host and hostess of the Jam Session. They welcomed guests and they even served coffee and refreshments at intermission. During the last 15 years Bob and Mary have only missed about 4 days of volunteering. They are of great value to our Centre as volunteers who greet guests and ensure that they take part and feel welcome. They also mentor others of the benefits and happiness that volunteering brings. Bob reports that some of the dancers come from as far away as St. Paul and Vegreville. Every week they drive their friend Martha who is a 103 to and from the Centre to dance. When asked how the Centre has impacted their lives Bob and Mary stated that it has kept them young. As well as coordinating the Wednesday Jam Session that has grown too often accommodate up to 110 dancers and 20 musicians; they also attend 3 to 4 other programs during the week.

Bob says that North West meets their needs. When he had an unexplainable rash for over a year he worked with the outreach worker and through thinking outside the box they found a cure for what doctors could not. When Mary became ill Bob came to the Centre for comfort and support. The staff came together to offer their assistance and support in any way they could. The outreach worker even took a ride with Bob to see Mary when she was unsure if she should call an ambulance when she was ill. Bob and Mary say that North West is their family. They feel supported and loved by both the members and the staff. Now lifetime members Bob and Mary are very enthusiastic in their belief that North West Seniors is the friendliest seniors Centre in the city. When asked the secret to staying young Bob replied "volunteering and staying active, remain positive - love and enjoy life!"
Volunteer Support

Programs that recruit, train and utilize volunteers.

- 14 Programs
- $3,019,187 Funding
- 3,942 Volunteers
- 134,088 Volunteer Hours

"Volunteering was the best thing I did for myself after my husband died in 1996. I found new friends. I have fun with my new friends at [organization]. After all these years, I belong." - Program Participant

Most used tools
1. Survey/Questionnaires
2. Interviews
3. Direct Observations

Majority of data was reported as collected during the program.

Percentage of participants who experienced positive change by outcome, including the indicators with the lowest and highest reported positive change.

* Note: relative to the number of participants data was collected from. Most programs do not collect data from 100% of participants.

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participants feel they contribute to positive change in the community (or agency) through volunteer activities</td>
<td>93%</td>
</tr>
<tr>
<td>Participants report at least one way in which their volunteering has made a positive difference in the community</td>
<td>93%</td>
</tr>
<tr>
<td>Participants report that their involvement contributes to goals that their community members are working to accomplish</td>
<td>96%</td>
</tr>
<tr>
<td>Participants increase their (a) knowledge and (b) skill through their volunteer involvement</td>
<td>95%</td>
</tr>
<tr>
<td>Participants demonstrate skills that could assist them to find employment or enhance their contribution to other paid or unpaid work</td>
<td>92%</td>
</tr>
<tr>
<td>Participants identify what they have learned about their community and/or themselves through volunteering</td>
<td>98%</td>
</tr>
</tbody>
</table>
Volunteer Support Narrative

Agency: Operation Friendship Seniors Society
Program: Volunteer Program
Outcomes: Participants feel they contribute to positive change in the community (or agency) through volunteer activities

Participants increase their (a) knowledge and (b) skill through their volunteer involvement

Operation Friendship Seniors Society has had the wonderful opportunity, over the past few years, to develop a great working relationship with both the Fine Option Program and the Adult Alternative Measures Program. Through these connections, OFSS is able to provide a rich opportunity for individuals accessing these programs to complete their required community hours in the Operation Friendship Seniors Society's Drop In Centre, while also connecting and engaging with their community in a positive way.

One particular volunteer who came to us in 2014, for instance, needed to complete 40 hours of work to meet his obligation to the program he was affiliated with. He opted to work two shifts a day, a total of ten hours, helping out in the Drop In Centre by preparing and serving meals, assisting in facilitating bingo, and was open to taking on other tasks as the opportunity arose. He approached his work with a pleasant, positive attitude. And, after he had completed his required hours, he asked to continue on as a permanent volunteer with OFSS. He continues to come in a few times a month, equipped with a huge smile and a willingness to help wherever he can. He has expressed his gratitude for the opportunity, advising that he now has meaning in his life: instead of getting into trouble, he advised, he is now using his time to help others. This is a truly a successful moment for the Volunteer Program.

Average investment per participant for this program area is $172.13

*This number is based on the total participants reported and the total amount of funding reported.
We are excited about where we are! And, though we have come a long way with developing and collecting outcomes, we have many more questions, discoveries, stories and challenges to explore as we continue on our common outcomes journey.

In February 2015, the Common Outcomes Advisory Group (a group of 20+ agency and funder representatives) started coming together again to talk about how we continue to move our outcomes work forward. We shared ideas, we listened, and we asked questions. What is the common impact of these outcomes, collectively? How do we report the impact on our entire community based on the work we are all doing? What part of my story needs to be told to contribute to improved outcomes and positive impact? How do we move the needle on particular issues? What did I learn from this, at the end of the day? Ultimately, we all agreed that what we truly want is to tell the real story, and to come up with a strategy for doing so together.

So, while we continue to share success stories and to deepen our understanding of the data, we will work together to connect the outcomes and impacts and to relay the meaning that the data represents. It is important to note that we are not looking at changing the common outcomes or the reporting tool at this time. Rather, as we have done in the past, we will gather at our June 2015 Prevention and Early Intervention Sector meeting to share the 2014 Common Outcomes Summary Report and to talk collectively about what we think the data means. Then, in late June and September 2015, the Common Outcomes Advisory Group will gather again to honor and utilize the feedback and suggestions shared by PEI Sector participants. This valuable information will enable us to continue improving upon our common outcomes work as we identify key impact statements and align the common outcomes within these impact statements.

CONCLUSION

On behalf of the funders and the members of the Common Outcomes Advisory Group, we thank all of the funded agencies for continuing to collect and report upon the common outcomes. We are sincerely grateful to you for sharing your stories, and we value your contributions and ideas as we move forward with this work, together.

Thank you for your ongoing support of this work.