

Determinants of Social Capital and Differential Success: Building a Better Life - Final Report

A Community Research Project with NorQuest College and the Edmonton Public Library

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Thank you to Project Elder Elsie Paul and Immigrant Wisdom Holder San San Sy for your support and guidance throughout the project.



Thank you to San San Sy for your support and advice on the final report.

Photo from the November 2017 public showcase event (from left to right: Scott McKeen, Jodi Abbott, Robert Marvin, Marlene Mulder, Michael Sambir, Soleil Surette)



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Project partner and connection to community



Case study, methodology map, and graphic booklet consultation, artwork, and design

Treaty 6 Acknowledgement: We would like to acknowledge that we are situated on the traditional lands, referred to as Treaty 6 Territory and that the City of Edmonton and all the people here are beneficiaries of this peace and friendship treaty. Treaty 6 encompasses the traditional territories of numerous western Canadian First Nations as well as the Métis people who have called this area home for time immemorial. We are dedicated to ensuring that the spirit of Treaty 6 is honoured and respected.

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Executive Summary

Social Capital

Social Capital is the combination of bonding & bridging relationships that contribute to Human Capital and life success. Social Capital building is recognized as necessary but is largely unfunded work, as evidence to its necessity is mainly anecdotal. Collaborators wanted to work on quantitative measures of Social Capital that would help them provide evidence of its importance when developing programming and seeking funding.

Community Built Research

Determinants of Social Capital and Differential Success: Building a Better Life was a three year project funded by the Social Sciences and Humanities Research Council of Canada. The project had two objectives of connection and insight.

• Connection: to create research synergies, comprised of service providers to marginalized populations, municipal government, and researchers, to build cohesion around policy and programming issues.

The researchers built on working relationships in the community. Collaborators and researchers collectively built the project and agreed on guiding principles of the seven sacred teachings of love, respect, wisdom, courage, honesty, humility, and truth. An Indigenous Elder and an Immigrant Wisdom Holder were advisors to the project. After each data collection phase researchers met with collaborators to vet their findings and seek advice on interpretation, understanding, and next steps.

• Insight: to learn how loneliness and self-esteem affect Social Capital, and how some can successfully use their Social Capital to strengthen their Human Capital to build better futures, while others have difficulty.

Thirty-six Likert scaled statements related to six themes of Social Capital (Loneliness; Trust for Others; Feelings of Connection to Others; Feelings About Self; Trust for Service Providers; and Community Engagement) comprise the Social Capital measurements. Six indices of the themed statements were developed and finally, one quantitative measure for Social Capital was developed.

Four initially planned groups included All Participants, and three subgroups: Indigenous, Immigrant, and Canadian-born non-Indigenous (CBNI). Three additional groups, that are not exclusive, were added later at the request of the community and relate to specific life conditions (problematic substance use, poor health, and ever homeless). The abundance of direct quotes in this report honour the voices of participants.

Six hundred and six face-to-face interviews, fifty focus group discussions, one methodology map, and three case study life maps were completed. One focus group discussion, conducted with staff from collaborating agencies mid-way through the project, served to bring further perspective to our analysis.

What we learned

Community developed research brings agencies together, bringing recognition, value, and sharing of experience and knowledge. The methodology was received as respectful and of value to participants, creating spaces for them to be listened to and to share with others. The ensuing methodology map provides a guide for community-built research.

Three detailed life maps demonstrate individual life trajectories to a better life. At data presentations individuals were able to recognize themselves in the stories and discussed how these stories made them believe that they too could overcome their own difficult situations.

Key learnings drawn from both the qualitative and quantitative data follow:

- People are resilient
- There are many challenges to meeting basic needs
- Participants are educated
- Relationships are key
- Good health is important
- Discrimination is common
- Being homeless at any time makes a difference
- Trust is essential
- Work-arounds (informal task oriented networks) are helpful
- Transitions out of programming are a difficult and precarious time

A working quantitative measure for Social Capital that can be used or modified for use in a broader context was developed. This measure will be useful to agencies in supporting program development and funding applications. Good health, volunteerism, and participation in spiritual or religious activities contribute to Social Capital. Problematic substance use, the frequency of experiencing discrimination, and having ever been homeless in Canada all serve to diminish Social Capital. These measures have differential effects on the various aspects of Social Capital.

Why this research matters

The substantive quantitative data set allows insight into the lives and conditions of those striving to build a better life. The Social Capital Index and its component measures provide insight into the causes of increases and decrease in Social Capital and may be used to determine where to best apply resources or programming.

Through this community-built project, agencies shared their work, learned new research skills, and developed relationships that promote further research and collaborative work.

Participants were respected and valued and through this process they talked about the value of building relationships and sharing with others outside their close contacts. A graphic booklet, designed primarily for participants, helped them to see themselves in the work.

What comes next

The Building a Better Life data products, including the final report, case study life maps, methodology map, project booklet, frequencies and descriptives, as well as the survey instrument, are all available for download off the project webpage <u>www.norquest.ca/better-life_or</u> by contacting the research team.

A sampling of ideas for further research related to building a better life are presented below:

- Health barriers to accessing health care, traditional medicine and spiritual practices, stigmitization of illness
- Discrimination those who discriminate, the socialization of discrimination
- Relationship of Indigenous Peoples and Immigrants creating alliances, breaking down myths

- Transition points in programming and and life situations
- Spritiual, religious, and cultural practices
- People living without support or connection

The Social Determinants of Differential Success: Building a Better Life project came to a close on June 30, 2019. The following researchers from the project are open to present data and findings, discuss next steps, or to develop further research ideas and can be contacted using the information below:

Marlene Mulder – <u>marlenejmulder@gmail.comn</u>; phone 780-893-3964 Robert Marvin – <u>bobmarvin@shaw.ca</u> Colette Cornejo – <u>colettecornejo@gmail.com</u>; phone 780-934-9738

Introduction

The Social Determinants of Differential Success: Building a Better Life is a community-based research project funded by the Social Science Humanities Research Council of Canada (SSHRC). Within the community the project is known by its' street name *The Better Life Project*, and in this report is referred to as such. The objectives of the project were twofold:

- Connection Objective: to create research synergies, comprised of service providers to marginalized populations, municipal government, and researchers, to build cohesion around policy and programming issues.
- Insight Objective: to learn how loneliness and self-esteem affect Social Capital, and how some can successfully use their Social Capital to strengthen their human capital to build better futures, while others have difficulty.

Social Capital

In preparing to promote the research idea in the community Social Capital was understood broadly and inclusively, borrowing from the World Bank definition (Siegler, 2014).

Social Capital is the glue that hold societies together and without which there can be no economic growth or well-being.

Social Capital includes social connections and all the benefits they generate. The benefits are evident at an individual level (e.g. through family support) or at a wider collective level (e.g. through volunteering). Social Capital is also associated with values such as acceptance, solidarity, and trust.

Social Capital is divided into bonding and bridging categories. Bonding Social Capital includes our close relationships with people like us, who we are most comfortable with. These people may include family, close friends, or colleagues. Bridging Social Capital refers to the relationships that we reach out for, those who may not be from the same social circle and who we may not immediately feel comfortable with. Social Capital works on the principle of generalized reciprocity where we can help each other without an expectation of gain, while believing that when we do need help, others will help us (Putnam & Gross. 2001).

Situating the Research

This research required working collaboratively to develop a research agenda that was meaningful and informative to the community. The goal was to establish working relationships in the community to conduct research that supports and informs community services. Edmonton proved to be a perfect location. Edmonton has the second largest proportional urban Indigenous¹ population in Canada, and the largest proportion when a 100 kilometer radius is considered. This research is timely as there is a strong effort to implement the Calls to Action resulting from the Truth and Reconciliation Commission of Canada (TRCC) hearings.

The face of Edmonton is increasingly multicultural, young, and is outnumbered only by Winnipeg in the number of Indigenous residents. The number of immigrants settling in

¹ In this report Indigenous includes only those born in Canada.

Edmonton from 2011 to 2016 was 1.5 times greater than the prior five year period (CANSIM Census 2016). Immigrants comprised 1 in 3 Edmontonians. With the influx of Syrian refugees since 2015, the City of Edmonton continues to make concerted efforts to help people settle and integrate.

At the municipal and provincial levels, there is a strong focus on addressing the needs of marginalized² populations, specifically with regard to poverty and homelessness. Edmonton's reputation of addressing community social conditions is evidenced by the City's initiatives to eradicate homelessness and poverty, and its' embracement of the Urban Isolation/Mental Health initiative. The city is also engaged in a 10-year plan to end homelessness, and the Mayor's Task Force on Ending Poverty. From a service perspective these issues are also being addressed by local non-government organizations and other public entities, largely.

Research Objectives

The Connection objective was relevant and significant because it built on existing relationships to create a common research agenda that served the needs of the community. Collaboration will foster understanding and participation beyond the scope of single organizations to learn from others and arrive at common goals.

The Insight objective offered an opportunity to learn about the research process, have a voice in developing a relevant research agenda, and learning about the factors that increase or decrease Social Capital.

The Insight objective built on the Connection objective through collaboration on a research project that helped develop vision into the development of bridging and bonding Social Capital. Learning from this research will inform programming for marginalized people. Connections and sharing findings with participants may foster transformational choices. A deeper understanding of the challenges that marginalized people face may lead to consideration for change or validation of practices.

The Report

The report begins with a review of the literature, followed by a description of the methodology. The data on all participants is reported in two chapters: Survey Data (Chapter 2), and Focus Group Data (Chapter 3). Chapters 4 through 9, include data breakdowns for 6 population subgroups.

The subgroup chapters are meant to be additive to chapters 2 and 3, and provide data only where there were significant differences between the subgroup and the other participants. The sections of the report dedicated to the subgroups are mainly restricted to quantitative data and contain mainly quotes from open-ended survey questions. Quotes were drawn from focus groups only where there was certainty that the participant belonged to that specific sub-group.

The first three subgroups are based on learning from the community visits made prior to submitting the funding application. The chapters include: Indigenous Subgroup (Chapter 4);

²For the purpose of this study, the marginalized are considered to be people who are treated as insignificant, powerless, or peripheral to society.

Immigrant Subgroup (Chapter 5); and, Canadian-born non-Indigenous Subgroup (Chapter 6).

At the request of the collaborators, three additional groups were added part-way through the project. These subgroups relate to specific life conditions. They include: Problematic Substance Use³ Subgroup (Chapter 7); Ever Homeless Subgroup (Chapter 8); and, Poor Health Subgroup (Chapter 9). These groups were not exclusive and participants could be included in one or more, or none of the subgroups. Participants are included in one of the subgroups described in the Indigenous, Immigrant and CBNI chapters.

Chapter 10 of the report is a discussion of What We Learned. This chapter includes sections on Ideas for Further Work and Research, and Resources for the Community. The final section of the report contains references.

Appendices to this report are available for download at <u>http://norquest.ca/better-life</u>. Appendices include the frequencies and descriptives for each group and the survey instrument.

The research team is available for community presentations and consultation regarding how to take this project forward. As none of the team members are currently employed at NorQuest College, their contact information is provided in the Executive Summary as well as at the end of this report.

The information presented in this report is drawn from 606 face-to-face interviews and 50 focus group discussions. The participants do not comprise a representative sample of any of the groups under review, thus findings describe only the participants in this study. The substantive numbers ensure confidence that the views shown in the data are those of many. This research was limited to the municipal boundary of the City of Edmonton with the exception of the NorQuest College Wetaskiwin Campus where two data collection events were held.

In this report the reader will find many direct quotes from the participants. The methodology and planning focused on respecting and learning from our community. The many quotes in this report allow the reader to hear the voices of the respondents, rather than the voices of the researchers owning the voices of the respondents. We are most grateful to Kim Ghostkeeper and Pieter de Vos, consultants from Alberta Community Development Services, who shared the following wisdom that kept us focused on being true to participants' voices.

No need to hear your voice when I can talk about you better than you can speak about yourself. No need to hear your voice. Only tell me about your pain. I want to know your story. And then I will tell it back to you in a new way. Tell it back to you in such a way that it has become mine, my own. Re-writing you I write myself anew. I am still author, authority. I am still colonizer and speaking subject and you are not at the center of my talk. (hook, 1989)

³ The terminology around substance use and abuse had differential understandings in the community. Those who worked with substance users indicated that the label *use* is most appropriate as it is not value laden. In the generally community, however, the term *abuse* is most commonly understood. We made the decision to use the term *problematic substance use*.

Literature Review

When measuring the ability of vulnerable populations to succeed on a socio-economic level, researchers and policy makers primarily focus on factors that relate to development, including housing, economic prosperity, and the ability to acquire and retain employment. Research has confirmed that these factors are important for ensuring the development of communities, and they contribute to peoples' ability to lead successful lives. Less is known about what people need in order to acquire those elements. Some research that focuses on understanding the importance of developing Social Capital has attempted to fill in this gap, but there is still much to be done, particularly within the Canadian context.

Hanifan introduced the concept of Social Capital in 1916 as "the social interactions, goodwill, fellowship, and sympathy that make a tangible difference in our lives" (Putnam, R., & Gross, K., 2001, 12). Loneliness and self-esteem are components in developing Social Capital, that include the *bonding capital* of connectedness with family and close friends, and *bridging capital* that creates links to individuals outside of ones' family or immediate circle (Lemos, 2000; Putnam et al, 2001; Murdie, 2010; Bohemier, 2010, Paradis et al, 2012; Brandon et al, 2014). Bonding capital serves primarily to prevent or alleviate loneliness and low self-esteem. Bridging capital is utilized as a resource to navigate the larger community: to establish social networks, to access education and employment, and to access services and assistance.

Studies on social engagement focus primarily on factors that include educational attainment, marital status, age, gender, children, household size, language, marry outside of ones' culture, place of residence, and parental education (Kuhn & Sweetman, 2002; Drost & Richards, 2003; Hull, 2005; Pendakur & Pendakur 2011). Much of this research has confirmed that social engagement is linked to Social Capital through community participation where a sense of belonging and willingness to participate continue (Mackinnon, Stephens et al, 2008). Not only is developing Social Capital important for the socio-economic development, it is also important for communities as a whole as it encourages people to give back by creating opportunities.

Loneliness is defined differentially with regard to value and cause, with theories falling on both sides of the nature/nurture debate (Bowman, 1955; Rogers, 1961; Whitehorn, 1961; Perlman, 1979). The research rests on a balance between the two, and borrows from General Systems Theory where loneliness is caused by ongoing system dynamics, (Perlman, 1979; De Jong-Gierveld, 1987; Leary, 1990; Jones et al, 2001; Glanville & Bienenstock, 2005; Rashid & Gregory, 2014). Self-esteem is one's self-judgment of overall worth (Rosenberg, 1965). Low self-esteem inhibits the development and maintenance of selfsatisfying relationships and thus leads to loneliness. Loneliness, in turn, negatively affects self-esteem. Loneliness and self-esteem are key factors in the development of Social Capital (Jones et al, 1981; McWhirter, 1997; Shier et al, 2010; Rashid & Gregory, 2014).

Lauder, W., Mummery, K., & Sharkey, S. (2006) investigated age and loneliness and the association between religiosity and loneliness. They also explored the relationship between Social Capital and loneliness. They found that loneliness is the subjective experience of social isolation and is a risk factor for a wide range of health problems including heart disease and depression. Poor self-rated health, domestic violence and poor economic conditions are associated with greater loneliness. They also found that loneliness and social isolation are linked to a range of social and economic factors.

It is important to note that Social Capital is not always a positive factor with regard to community development. In some cases, no effect was found. Mignone, (2009) explored ways in which Social Capital can support the socio-economic development of certain

vulnerable populations within Canada, noting that there are many other societal factors that contribute to the success of communities and individuals.

For marginalized people with low human capital, Social Capital may be a less effective tool in building a better life. Factors that diminish Social Capital include declines in primary group relations, family mobility or separation, and a decrease in social mobility (Bowman, 1955; Kirova, 2001; Kazemipur, 2006, Novak et al, 2009).

Since this project focuses on understanding the importance of developing Social Capital with three main demographic groups, the next three sections outline some of the research and literature as it relates to newcomers, Indigenous communities and other marginalized populations.

Indigenous

For First Nations Canadians, direct or vicarious traumatization from residential schools, the disproportional number of Aboriginal children in foster care, poverty, and lack of basic services and housing on reservations, contribute to isolation in an urban centre with few networks to facilitate progression to *the good life* (Wingert, 2011; Mignone et al, 2011; Goodkind et al, 2012; Kiepal et al, 2012; Daoud et al, 2013, Patrick, 2014). While refugees and Indigenous Canadians differ, they share experiences of trauma and displacement, and challenges of living in Edmonton. Factors contributing to the differential value of Social Capital are found by gender, ethnicity, age, education, and experience of trauma (McWhirter, 1997; Wuthnow, 2001; Menzies, 2007).

Indigenous communities are challenged by discrimination and establishing new communities when moving off reserve to pursue higher education, find adequate housing, or acquire jobs. In Canada, a body of research focuses on community-level Social Capital development with regard to various outcomes including sustainable development, education, health, and economic prosperity. Social networks were found to assist Indigenous communities in overcoming challenges to entrepreneurship, access to markets, and business skills (Levitte 2004).

Studies show that creating programs that establish culturally sensitive tools for creating Social Capital are related to youth resilience and crime prevention by reducing isolation and social disorganization (Corrado et al. 2005; Mignone 2009). Social Capital can also be a determinant of health outcomes and can provide a more holistic approach to program development for Indigenous communities (Mignone 2009). Indigenous Canadians with higher levels of human capital, as indicated by educational attainment, health status, and Social Capital, are more likely to have higher employment income (Hossain & Lamb 2012).

Immigrants

Newcomers to Canada, especially those who come as refugees, have little choice about leaving their home countries, often experience prolonged trauma, and were in refugee camps or displacement situations for protracted time periods. They are far from relatives, do not know the culture of the new society, and may be functionally unprepared to participate in society (Kazemipur, 2006; Abu-Laban et al, 1999; Francis, 2010; Hiebert, 2010; Magro et al, 2010; Pasi, 2011; Thomas, 2011; Vancouver Foundation, 2012; Basu, 2013; Rahder et al, 2013).

One of the biggest challenges that immigrants face when they arrive in Canada is finding employment. Research shows that newcomers face particular challenges as they enter into new communities where they do not have established friends or networking contacts, and are unfamiliar with many of the social customs. Moving frequently also makes it difficult for people to develop a sense of community (Rose 2004). There is some evidence from the U.S. and Australia that ethnicity and social networking are positive strategies for immigrants and that Social Capital is used effectively by groups with strong cultural ties (Amuedo-Dorantes and Mundra 2004). The ability to form social networks also plays a key role in helping newcomers to gain better employment (Amuedo-Dorantes and Mundra 2004; Kunz 2003). Newcomers draw on various forms of social networks in order to gain access to resources and the job market (Rose 2004). "The initial success of immigrants lies in the depth and reliability of their bonding capital. This is particularly valuable to a newcomer's initial job search as more than half the jobs in Canada are not advertised but come through personal referral" (Kilbride, M. et al, 2006, 12). In addition to settling into a new culture and establishing new communities, newcomers are often faced with discrimination that impedes their ability to form strong social networks (Mattu, 2002; Murdie 2002, Miraftab, 2000; Chambon et al, 1997).

Using data from the General Social Survey, Kazemipur (2011) examined the community engagement of immigrants in Canada. The findings indicate that immigrants add to the overall level of community engagement in Canada in the areas of confidence in public institutions – such as judiciary, government, police, welfare system, education, and health care – and involvement in religious activities. The areas in which immigrants fall behind are those that involve social interactions with the host population (e.g., trust, neighbourliness, social networks, group activities, volunteering, etc.) or engagement with the private sector (e.g., confidence in private institutions such as banks and major corporations). Some of these measures of community engagement improve over time, but there is also an alarming trend that some decline with longer stays in Canada.

Other Marginalized Groups

For people who have experienced chronic homelessness and are newly housed, one of the biggest challenges is losing the social support networks that they established and built during time living on the street. Many individuals, gain a form of Social Capital through their networks, "Researchers suggest that homeless street youth and young adults gain resources from a variety of network affiliations both on and off the street but tend to gravitate toward other homeless street peers for many basic survival needs" (Stablein 2011, 293). Participation in street life increases the chance of prolonging existing states of homelessness (Bourgois, Lettiere, and Quesada 1997; Bourgois, Prince, and Moss 2004; Karabanow 2006; O'Sullivan 2003; Rice et al, 2005). As such, it is important in this case for people to be able to form those similar ties and bonds that enable them to mitigate street life. When homeless people are housed, they need social support networks, family and friendships in order to be successful.

Lemos (2000) makes the argument that the breakdown of social networks is a cause of homelessness. The continuing absence of social networks is also a barrier to escaping homelessness. Lemos (2000) discusses the impact of family, friends, social networks, and negative and positive freedom. Freedom can be used to build social networks or, conversely, to break them down. Negative freedom allows one to postpone or delay dealing with important matters, while positive freedom allows a person to build relationships to make positive change.

Service Provision

Research on service provision shows that clients value relationship and prefer the continuity and face-to-face contact that facilitates relationship building. A study about service provision examined mothers who were involved with the Canadian child welfare system. They were asked to provide recommendations to improve practices. The mothers focused on the relationships between parents and workers as most important, and their desire to have workers who were respectful, honest, caring, supportive, non-judgmental, and encouraging. They further stated that workers should have empathy and provide concrete supports so that parents can maintain connections to their children (Hughes, J., Chau, S., & Rocke, C. 2016).

Hanna (2010) examined the global use of call centre operations in public and private sectors as a notable development in the changing structure and nature of employment worldwide. This trend is clearly evident with the establishment of a call centre as the official point of entry for the statutory child protection systems in both New Zealand and New South Wales. As sites of professional practice, however, call centres are an emerging development.

1. Methodology

Setting and Background

This chapter describes how the community and researchers developed the Better Life Project methodology. The connection objective was to create research synergies comprised of service providers to marginalized populations, municipal government, and researchers, in order to build cohesion around policy and programming issues. Community-based research is subject to change, refocus, redesign, and differential perspectives and understanding. Researchers must be comfortable with ambiguity and change throughout the process, and must be able to move outside the realm of expert to stand beside, and be guided and challenged by all involved.

It was imperative that community be involved throughout the entire research project. Community service providers, hereinafter referred to as collaborators, brought understanding through many lenses of inquiry, and through their subsequent perceptions and directions. It was most important to understand that life experiences shaped the framework for the inquiry from which the project emerged. A map outlining the unique process of the project's methodology is found at the end of this report.

The Research Team

The principal investigators (researchers) brought their respective expertise and experience in the areas of Social Work and Sociology. Robert Marvin has well established experience as a Social Worker in the community where he worked with some of the most vulnerable populations. Marlene Mulder's experience in research, along with her work in the community with the homeless and with refugee sponsorships and settlement, grounds her in the community. Both principal investigators have lived in their community of research for more than three decades and bring further experience to their respective fields from their work in remote marginalized communities. They have well-established relationships of trust with community members, service providers, and local government.

Informative grounding for this study was established by Marvin as he helped his students learn about their community and develop research skills at NorQuest College. He introduced a class project where they surveyed their fellow students utilizing the UCLA Loneliness Scale (Russell, 1996). This project was carried out collaboratively with the Students' Association at NorQuest College (SANQC) who subsequently used the research findings to support their application and successfully procure grant funding for student mental health projects. At the time of writing this report, this project has become a staple in the Social Work classes at NorQuest College and was conducted over the past 5 years.

Mulder's education, career path, and volunteerism, have centered on marginalized populations, including the homeless, Indigenous Peoples, and newcomers to Canada. Her volunteer work with refugee settlement is grounded in a deep appreciation for long term relationships of trust and collaboration. Mulder developed research teams where individuals with lived experience are able to learn and develop their skills and Social Capital.

In their roles of research analyst and social work instructor at NorQuest College, Mulder and Marvin worked together to further develop the classroom project. They also explored how to build research connections to the many service agencies in the community that support people who seek a better life. While the goal of most post-secondary students is to build better lives, this desire is especially apparent at NorQuest College where approximately 60% of the students are immigrants, close to 10% are Indigenous, and many others are returning after long lapses in education. This focus is demonstrated in NorQuest's course

offerings that include Language Instruction for Newcomers (LINC), academic upgrading, and a variety of foundational learning programs.

Zeina Sleiman-Long, a Ph.D. candidate in Political Science, worked on the project from February 2016 to November 2017 as the research coordinator. She liaised with collaborating agencies to build and maintain relationships and arranged data collection and dissemination events. She managed the research assistants, oversaw the transcription of qualitative data, and was the lead for the qualitative analysis. Following her tenure with this project Zeina completed her Ph.D. in Political Science in 2018, where her work focused on understanding the ways in which precarious migrants make claims for human rights in the United States. Zeina presently serves as an innovation specialist at NorQuest College where she develops and manages projects that respond to the needs of newcomer students in Alberta.

Colette Cornejo joined the project as the field coordinator in January 2017. She brought extensive experience interfacing between project teams and their stakeholders grounded in a wide variety of projects ranging from performing evaluations to support northern Alberta First Nations health commissions to conducting province-wide stakeholder consultations for Alberta Health. Her strategic planning helped the team to anticipate and plan for future needs and ensure all stakeholders were kept informed as the project progressed. As Colette took on more responsibilities associated with the writing of the final report and the dissemination of the research findings her position was re-classified to project coordinator. Colette maintained communications with external partners and collaborators, providing project updates and inviting their input. She worked with planning, budgets, and implementation of the research. Her careful attention to detail and grounded experience in community research as well as NorQuest systems, made her invaluable to the project.

Research Assistants

Two criterion guided the hiring process: our funder's requirement to hire and train students; and, the project goal to hire people with lived experience, or those who have more to gain from the project than a pay cheque.

Typically, SSHRC funding is allocated to universities where bachelor's or graduate students are readily available to work as research assistants. For this project we mainly hired students from NorQuest College from certificate or diploma programs where students had very little or no research experience or training. While this situation meant more training and mentorship regarding research methods and practice, many of the research assistants came to the job having struggled to find their way out of marginalization. They brought a wealth of lived experience to the project.

Given the casual hours of work and the desire to retain staff, it was most important to offer training and experience that was of value in staff's endeavours to build a better life. Training included intercultural awareness, Indigenous research protocols, building rapport in the community, interviewing skills, data collection, and data entry. At the training sessions time was also scheduled to role play, learn from each other, and build community. Research assistants participated in training sessions prior to each round of data collection.

Over the course of the project eleven research assistants were hired. Ten of them were students at the time of hire and came from NorQuest College, Northern Alberta Institute of Technology, and the University of Alberta. All brought lived experience and expertise to the project. Within this group, five were immigrants, four were Indigenous and the remaining two were Canadian-born non-Indigenous. The research assistants demonstrated ease and rapport that translated to a comfortable environment for the participants. At times, participants could not determine a difference between researchers and participants.

Research Assistants used their work on this project to build their own better lives. They described their experience:

I definitely have a greater confidence of myself as a researcher. Overall I cannot place a value on the benefit of being part of the team that worked on this project.

This experience overall has been amazing. I was not ignorant to some of the issues that were brought up to us but actually interviewing many people has made the issues and success stories real. It has helped me become a better activist.

Research Partner

When considering a strong partner for this work, the Edmonton Public Library (EPL) was the obvious choice. The EPL has a long and respected history of working with the marginalized community. EPL was the first Canadian public library to win the Library of the Year Award in 2014 for their approach to serving the community. EPL provides spaces for people at no cost, as well as assistance with English language acquisition, health, employment, and community services.

The researchers began building a relationship through discussions with a Social Worker employed by the EPL. These discussions led to further collaboration with the EPL research office resulting in a memorandum of understanding to work together to develop communitybased research that looked at the development of Social Capital to build better lives.

Collaborating Agencies

To develop research that is truly grounded in community, agencies and organizations that work directly with marginalized people must guide and direct the research. With the hope of establishing at least five community collaborators, the principal investigators began visiting agencies and branches of government. They felt it was important to visit people at their place of business and meet front line workers as well as leadership. Because they were proposing a research idea, rather than a designed project, at this early state they were unable to answer many questions about methodology. They could only commit that collaborators would be given the opportunity to be a part of developing the research. This approach was unfamiliar to some who were more accustomed to being presented with an established project and methodology. The ambiguity around the freedom to develop a project was not always comfortable for the researchers as they worked to create balance between funder's requirements, what the community wanted, and what was possible within the budget. Research partners and collaborators offered in-kind support to optimize the research scope and encourage participation.

The proposed project became known in the community, and by our application deadline we had 4 agencies officially signed on as collaborators. To build community and trust, and to gain direction on vision for this project, we met face-to-face with more than 45 agencies at their individual locations, and depending on the level of engagement and need, there were multiple meetings at some sites. These conversations informed the direction of our literature review. The research team sourced a variety of scales, indices, and quality of life measures to inform our work. Based on discussions and suggestions from the community, a variety of methodologies, potential questions, and interview guides were developed to provide a basis for discussion and planning. Word of the project grew and by the time we were awarded \$239,296 in SSHRC funding, more than 40 agencies had indicated interest.

Research Planning

The initial plan was to bring all collaborators together to develop the methodology, however, with more than 40 onboard, that number became too large for a functional working group. This situation was communicated to the collaborators, and an invitation to participate in a smaller working group was extended. Participation in the smaller working group to develop the methodology required a substantial time commitment to read documents and attend two days of planning meetings. Given the expertise within the collaborating group, personal invitations were also extended to those with research experience and a strong reputation in the community to ensure their representation.

It was important to the researchers that during the project development process their own decision making status was not above that of the collaborators. After communicating the requirements that were non-negotiable based on the conditions of the grant funding, the researchers passed the facilitation role to representatives from Alberta Community Development. This process allowed researchers to participate on equal footing with collaborators, to not be seen as experts, and to work together to learn about Social Capital.

The planning began with an open discussion about what a community-based research project on marginalization should include. The facilitators led the group through the process of developing the research methodology, the survey document, and the dissemination plan. Collaborators were engaged and validated throughout the process which led to excitement about being involved in developing a meaningful project with potential in the community.

From these sessions an existing body of *grey literature*⁴ was brought forward by collaborators. This body of work and knowledge, offered by collaborators, informed our process and encouraged discussion on how this work could be shared in the community.

Guiding Principles

Collectively the working group developed the following guiding principles as a framework for the project.

- Use the Indigenous Seven Sacred Teachings of Love, Respect, Wisdom, Courage, Honesty, Humility, and Truth as a guide for all activities.
- Nurture working relationships and emphasize ethical practice with community.
- Demonstrate behaviours that honour, respect, value traditions and customs, and validate people by listening to their voices.
- Practice community inclusion in recognizing and working with an Indigenous Elder and an Immigrant Wisdom Holder⁵.
- Be sensitive to the demands placed on agencies from past researchers. Agencies receive numerous requests to gain access to research participants, and are protective of their clients. It is important to carry out research without contaminating the environment. Hire research staff that can benefit beyond a pay cheque. Create a research team with a balance of research skills and lived experience.

⁴ Materials and research produced by organizations outside of the traditional commercial or academic publishing distribution channels.

⁵ The Wisdom Holder is a respected person from the Immigrant community who serves as a counterpart to the Indigenous Elder.

After-Care Strategy

In planning an after-care strategy, the researchers worked with host agencies to establish a list of contacts for participants who wished to talk to someone if the research affected them in a way that required further support. For each agency hosting data collection, this list was customized to include a list of contacts as well as contacts specific to the hosting agency. Participants were presented with this information verbally and in print. The information sheet included contact information for the researchers, resources available through the City of Edmonton, and information about the study. In addition, materials such as the *Tough Times Handbook*, a catalogue of helping resources for low income Edmontonians, was made available to participants.

Research Schedule

A research schedule was developed with the expectation that as we met and vetted our progress, changes would occur. The data collection schedule was designed to cover three seasons. The initial goal was 450 survey interviews to ensure a large number of participants given that there was no option for random sampling of Edmontons' marginalized.

Funding for the project was awarded on July 1, 2015. The following schedule decisions were informed by the small group facilitation meeting in November of 2015, however the preliminary development work for this project began as early as October 2014. The research schedule was designed so that collaborators could review data after each collection iteration and provide feedback and suggestions for the next round(s).

- November 2015 Collaborators small working group meeting
- December 2015 Presentation and approval of research plan for all collaborators
- January 2016 Ethics approval Red Deer College Research Ethics Board
- March April 2016 Spring data collection (Round 1)
- November 2016 Data review with collaborators
- November 2016 Public data presentation at the Edmonton Public Library
- February April 2017 Winter data collection (Round 2)
- September 2017 Data review with collaborators
- November 2017 Public data presentation at NorQuest College
- November 2017 Focus group with collaborators
- September December 2017 Fall data collection (Round 3)
- November 2017 to January 2018 Case studies (Life Maps)
- December 2018 Final project presentation & showcase at Edmonton City Hall
- June 2019 Final report completed

Project Components

Surveys and Focus Groups

Research staff worked with collaborating agencies that offered to host data collection events and invite their clients to participate. The primary research participants included clients of collaborating agencies but were not limited to the homeless or marginally homeless, newcomers to Canada, and Indigenous peoples.

Research staff visited potential hosts to collectively decide how to best use the physical space available, and to decide on the data collection. Agencies were also asked for advice about what type of food and gift cards would be appropriate for participants at their site. These visits provided a good opportunity for research staff to address questions, and to re-inforce with agencies the research teams' commitment to accommodate host and participant needs and interests.

Research staff provided agencies with posters to advertise the data collection and the agencies carried out the bulk of the work associated with making people aware of the data collection events and encouraging them to attend. Where possible hosts were also asked to maintain a list of registered participants. Depending on the needs of the participants additional services, such as child care and transportation, were sometimes offered in conjunction with the data collection. The success in recruiting participants is credited to the substantial commitment and efforts of the collaborators.

Three hours were typically scheduled for data collection, most often during the day on weekdays, but also in the evenings and on the weekend as required. To be respectful of each collaborating agency's needs and nature, the data collection format as outlined below served as a guideline and could be modified as required.

- Principal investigator(s) were present at every data collection.
- Research staff arrived on-site to set up physical space.
- A refreshment station was set up for use throughout the data collection event
- Agency staff provided opening remarks.
- Smudging took place as requested by host agencies.
- Format and purpose of the research were explained by the research staff and questions and concerns were addressed.
- Participants completed a 12 page survey through a one-on-one in-person interview led by research assistants. This method allowed each participant to have designated time with someone who was there just for them. Some participants read along with the questions as the research assistants presented them. Not being required to read a questionnaire was appreciated by those with literacy difficulties or language barriers. On numerous occasions, the second language skills of our research assistants were utilized and we were able to offer interviews in Arabic and Tigrinya.
- A shared meal brought research staff and participants together. Research staff intentionally sat among and visited with participants. The best food the budget would allow was ordered in generous quantities. The research team maintained a stock of containers so participants could take food home if they wanted it.
- Focus group discussions were led by the researchers. A talking stick⁶ was used to create order and respectful listening. The talking stick is rooted in traditional Indigenous practice, giving each person an opportunity to speak without interruption. It is passed from person to person and the recipient may pass the stick on or use their turn to speak.
- Focus group sessions were audio recorded and Subsequently transcribed.
- Research staff took notes on observations and reflections.
- Participants were given a \$25 gift card to thank them for their time. Choice was
 offered between a grocery or fast food outlet to accommodate participant needs and
 preferences. To meet our institutional requirements participants were asked to sign
 for these cards, however, if there was discomfort around divulging a name,
 pseudonyms were welcomed.
- Research staff cleaned and organized the space to leave it in the same condition as found on arrival.
- Research team debriefed following each data collection.

⁶ The talking stick for our project was crafted by Strong Horse, from the Niginan Housing Development Project. It was acquired and delivered to us by one of our Indigenous Research Assistants.

All materials needed for data collection, from hard copies of the survey to disinfectant wipes to sanitize areas used to serve food, were carried to and from each data collection. This was done to minimize the burden on hosting agencies.

Collaborator Focus Group

A collaborator focus group session after the second round of data collection served two purposes:

- To discuss any final thoughts about the data collection process, and learn of any required changes.
- To ask the following questions:
 - How does your organization support building Social Capital?
 - What strategies do you use to build social connections?
 - How can organizations work together to build Social Capital?

Case Studies

Six traditional case studies were initially planned. As the project progressed collaborators indicated interest in having visual products that presented journeys to a better life. The number of case studies was reduced to accommodate three life maps to allow for a more indepth analysis and visual presentation of marginalization transcendence. The expertise needed to utilize this methodology was secured with a consultant from Mapping and Planning Support Edmonton (M.A.P.S.). An additional methodology map that shows the unique process of this community-built research methodology was developed with the help of M.A.P.S.

Three participants, who were exemplars of success in building a better life, were chosen for individual life maps. The life maps show each person's trajectory in dealing with challenges common to many. The first participant had experienced poverty, instability, child abuse, and spousal abuse. The second was a new Syrian immigrant who came to Canada as a refugee after suffering loss, personal injury, and displacement. The third was an Indigenous person who experienced child abuse, substance abuse, gang activity, and incarceration.

The process for developing the life maps comprised 5 to 8 two-hour sessions that included 3 people; the individual whose life was being mapped, the consultant from M.A.P.S., and one member of the research team. The first session was used to build rapport and trust. In sessions 2 through 4 the participant told their story from the starting point they chose, and without interruption. In these sessions the facilitators focused on being attentive listeners and note takers. The notes were then used by the M.A.P.S. team to design the life map including overall concept, background imagery, and original artwork depicting people and places. Sessions 5 through 8 were used to ask the participant clarifying questions and for them to review and vet their life map. Once the participant was satisfied that the map was complete they were asked to sign off on it to confirm the end of the development process.

Upon completion, each participant was provided with a final printed version of their life map. To ensure continuity, once a member from the research team was assigned to a particular individual, they became the research team representative for the duration of the process. They maintained contact with the participant, attended all meetings, and ensured a final copy of the map and honorarium was received by the participant.

Dissemination Plan

Prior to carrying out the research it was difficult to create a specific plan for dissemination, however, it was agreed that the research findings should be accessible, understandable, and easy to use. The dissemination plan was developed for a variety of users, namely participants, service agencies, government, public, educators, and academics.

Publications

With regard to peer-reviewed journals, the collaborators stated a preference for open access journals as the majority of agencies did not have access to journals with subscription fees. They also encouraged publishing in local professional magazines (i.e. The Advocate, published by the Alberta College of Social Workers) because they were readily available to service workers in the community. Newspaper and online articles were also strongly encouraged as being easily available to participants and collaborators (i.e. Star Metro).

Data Presentations

In addition to peer reviewed conference presentations and smaller local conferences that were available to greater numbers of service providers, collaborators were most interested in presentations at their staff and local community meetings. These presentations could be done in the form of a researcher making a presentation, a collaborator sharing the report, or, as a report or executive summary.

To further respond to collaborators' requests for visual presentations a drawn methodology map was created to illustrate the unique and inclusive research process. A user friendly illustrated project booklet was also developed to present the findings to participants.

Challenges

As with any project that is inclusive of and attentive to a large diverse group, challenges and changes occurred over the course of the project. Challenges and the efforts made to address them are presented below.

Trust and Working Together

Many of the challenges related to trust and working together were addressed through involvement of the collaborator working group, and the vetting and approval of the process with the larger group. As collaborators found that their voices were heard, they were willing to invest time into the process and share their knowledge to make the project the best it could be.

Changing Faces

The retention of research staff is important so that experience and knowledge are not lost. The hiring of college students as research assistants contributed to recidivism on this three year project as they graduated and moved on to other opportunities following their one or two year programs. Nevertheless, we were fortunate to have staff that were invested in the project and we were able to retain most of the research team for more than one data collection cycle. One research assistant was with the project from the beginning to the end.

Collaborators also experienced staffing changes over the course of the 3-year project. Furthermore, organizations also shift focus as priorities change. At times, a reinvestment of time and energy was required to re-establish connections with agencies and keep them engaged in the research. An important factor that provided continuity to the project and offset the effects of turnover in staff and collaborators was the involvement of the principal investigators throughout the entire project. Both were involved for the duration of the project and maintained active roles in preparing the funding application, collecting the data, managing staff, engaging the community, analysis and report writing, and dissemination.

Managing Expectations

While our communication and feedback with collaborators went far to manage expectations, it was more difficult to do so with participants. While some participants from agencies that are typically over-researched were skeptical, over the course of the process they enjoyed and appreciated that they were being listened to.

While collaborators and the research team were careful to be very clear about the research timelines, participants hoped to learn about the results of the study long before the research team could complete analysis and report writing. The principal investigators offered their contact information to participants and, when possible, released preliminary findings to collaborators and participants who contacted them. At the suggestion of a collaborator, thank-you cards were developed and given to collaborators to share with participants between the 2nd and 3rd rounds of data collection. The card shared preliminary results at an early stage and extended thanks to participants for their participation.

Within the process of data collection, some participants required extra accommodation. The research team responded to participants' unique needs, for example, meeting outside in the rain with someone who could not tolerate being in a building with other people. Participants expressed satisfaction with the experience of being interviewed 1-on-1 and being attentively listened to. At the end of the focus group sessions, participants often asked to meet again. They wanted to stay connected, stay longer, and feel the community they felt in the data collection process. The following comments from participants show their feelings about the research.

This survey brought me to reflect on my situation, brought light to different aspects of my life. I am grateful and I want to do better for myself.

Good! Awesome going out to public to ask what they need.

I am grateful for being here, because *I* am aware of how important this research can be in the life of people. It is a huge impact.

I enjoyed my experience talking today.

I feel comfortable and it is an opportunity for me to share my true feelings about how I think and feel about my life in Canada.

It was helpful and informative for me. Also I was comfortable with the group and it allowed me to experience other peoples' viewpoints.

It was very good. I'm very happy, and the one that interviewed me is very good and kind.

It's a good survey. You asked me questions that no-one has ever asked me.

The survey was good. The questions were very good. I got to talk about myself and feel heard.

We need more stuff like this survey because there are more people like me who don't speak out for ourselves.

You hit the nail pretty right on the head with this survey.

Vetting the Data and Differential Perspectives

Our environment and experiences influence the way we understand life and those around us. Given the very diverse nature of the collaborators and the clientele they serve, it is understandable that concepts and values that were thought to be common were not common at all. While consensus is not always the intention of the vetting process, when it is not reached, it is important to be cognizant of differential understandings.

Two examples of differential understanding brought forward by collaborators, demonstrate the wisdom of vetting the data in the community. When trust was presented as a positive trait, a collaborator pointed out that trust is not always a good strategy when you are homeless. In another example, the terminology around substance use and abuse had differential understandings in the community. Those who worked with substance users indicated that the label *use* is most appropriate as it is not value laden, however, in the larger community the term *abuse* is most commonly understood. The decision to use the term *problematic substance use* was reached.

Inclusivity versus Budget

Another challenge was related to the intent to be inclusive while keeping to the budget. While participants were encouraged to preregister, many times the research team arrived at agencies to find many more participants than planned. They found ways to accommodate participants by staying longer than scheduled or planning an additional data collection. The support from collaborating host agencies with their provision of space and advertising for data collection events also helped to keep costs down.

At the September 2017 meeting, prior to our final round of data collection, the working group made the decision to add three more subgroups for analysis, including problematic substance use, ever homeless, and poor health. This change meant being strategic in choosing sites for the final round of data collection.

On-the-spot Flexibility

On one occasion the research team arrived at a data collection site where the expected participants did not arrive. The venue that was open to the public and is located in a low income area of the city. In order to recruit participants, research team members went out onto the floor, explained the study to members of the general public, and invited them to participate if they felt the study fit them. While this cold call approach to recruiting was intimidating for several members of the research team, especially those who were less outgoing, the primary researchers were on-hand and led the way. They jumped in with the rest of the team and kept things upbeat while they continued to recruit and encouraged others to do the same. In the end, the event was a success with a full complement of participants.

Inclusion of NorQuest Students

As the only publicly funded post-secondary institution in Edmonton, NorQuest College attracts many students who are rebuilding their lives. Two data collection sessions were held at NorQuest's Wetaskiwin campus that is almost exclusively attended by Indigenous students. These Indigenous students provided insight into their journeys to improve their lives through post-secondary education. At Wetaskiwin we interviewed students in Upgrading programs. At NorQuest's main campus in Edmonton, participants were primarily immigrant students from the Social Work and Day Home Provider programs.

Expected Outcomes

At the onset of the project the research team and working group developed the following list of expected outcomes for the project. These expectations informed the development of data collection tools, the format and location for data collection events, and the research dissemination activities.

Participants will:

- Recognize themselves in the research
- See the results in their own learning and belonging
- See that the project has created ongoing supports
- Gain recognition of personal responsibility for healing

Service providers will:

- Have more knowledge about services that are driven by client needs
- Gain data to support apolications for funding for service and research
- Enhance sharing research in the community and building reeach capacity and knowledge
- Be part of an established group for further on-going collaboration

The broader community will:

- Recognize the value and importance of belonging
- Pursue community connections and places to develop meaningful relationships
- Gain expertise and relationship to engage in further research
- Build stronger links to NorQuest College and the Edmonton Public Library as community resources

The research community will:

- Have data related to Social Capital, loneliness and belonging
- Have research results that will inform community practice and policy
- Build or continue collaboration with other researchers

2. All Participants – Survey Data

This chapter includes the data from the face-to-face interviews for all participants. While some of the data is presented by Indigenous, Immigrant, and Canadian-born non-Indigenous (CBNI), more detailed breakdowns by group are presented in subsequent chapters of this report.

The Indigenous participants were mainly those who used support services at the collaborating agencies. A small number were students in upgrading programs in Edmonton or at NorQuest's Wetaskiwin campus.

Immigrant respondents were mainly newcomers to Canada who were students in language or upgrading programs. A small number of immigrant respondents were accessing services at collaborating agencies.

The CBNI participants largely came from drop-in programs at collaborating agencies that provide for basic needs

While all participants are considered marginalized for a range of reasons, some experienced greater difficulty building a better life. These differences may in part be influenced by the location and type of service offered from where they were invited to be part of the study. While the results for immigrant participants show that they have more positive lives with higher Social Capital, it must be remembered that all participants fell below the greater Edmonton population with regard to measures that were compared with Canadian Census data.

Demographics

Forty-five percent (45%) of the participants in this study were immigrants to Canada. For clarification purposes, and to align with the Statistics Canada's definition, we refer to immigrants as those who were born outside of Canada⁷. Thirty-five percent (35%) were Indigenous, and the remaining 19% were CBNI.

Sixty-two percent (62%) of participants were female, 38% were male, and two participants were transgender. The age of participants at the time of interview ranged from 18 to 73 years with a mean of 41 years.

Relationship attachment is known to provide a level of protection from marginalization and isolation (Gattino, 2013; Hossain, 2019). For this study an attached relationship was defined as a close, dependable relationship with a partner or spouse. Only 27% of participants were in attached relationships, compared with 51% of Edmontonians as reported in the 2016 Census (Statistics Canada, 2016).

More than half (52%) of the respondents reported having children under the age of 18 with a mean of 2.29 children, and a range of 1 to 9. The large majority of these children were living with their parents (75%), or in shared parental custody (14%) with an ex-spouse or

⁷ Four participants who were born outside of Canada, who were Canadian citizens at birth, are included in this section.

partner. A very small proportion lived with grandparents (6%), other relatives (3%), or were in foster care (6%).

Forty-five percent (45%) of the participants in this study were immigrants. For clarification purposes, and to align with the Statistics Canada's definition, we refer to immigrants as those who were born outside of Canada⁸. Thirty-five percent (35%) were Indigenous, and the remaining 19% were CBNI.

A question about military service was asked because in the U.S. being a veteran is a factor in marginalization and a barrier to building a better life (Ray, 2011). Only 15 participants were veterans, accounting for less than 3%. This number was not large enough to allow a detailed analysis.

Living in the Community

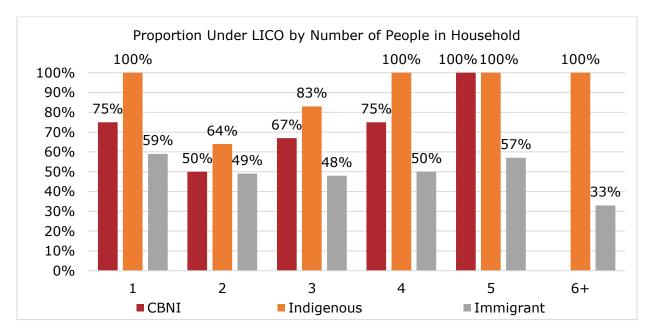
Participants were asked how long they lived in Edmonton. The length of time one lives in a community is a factor in building relationships and having a knowledge of services and events. There was a wide range of time from less than 1 year to 72 years with a mean of 14.5 years. Twenty-eight percent (28%) of respondents had not moved in the past year, and for those who had moved, the number of times ranged from 1 to 25 times, with a mean number of times moved at 1.8.

Income

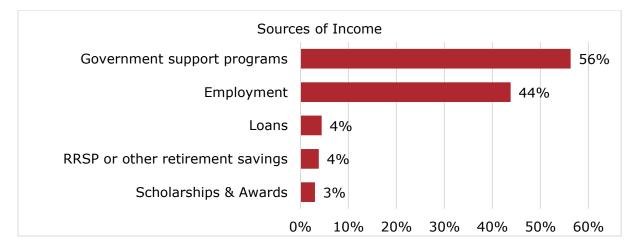
Participants were asked about their total household income in the year prior to their interview. Some respondents found it easier to report either weekly or monthly income, these amounts were converted to annual figures during data entry. Many respondents did not know their income, or, because it fluctuated greatly, were not able to offer income information. The median household income for participants was 19k much lower than the 87k median household income in the Census Metropolitan Area (CMA) of Edmonton in the 2016 Census data.

Following the first round of data collection an additional question was added to the survey document to collect data on the number of people living in a household. This additional data allowed determination of the number of respondents living under the Low Income Cut-Offs (LICO). This detail was collected for 338 respondents. The following table shows the proportion of respondents from rounds 2 and 3 of data collection that were living under the LICO. Poverty was the most widespread for Indigenous respondents where 100% of respondents in four of the categories of household size lived under LICO.

⁸ Four participants who were born outside of Canada, who were Canadian citizens at birth, are included in this section.



Participants were also asked to report their source of income with the option to report multiple sources.

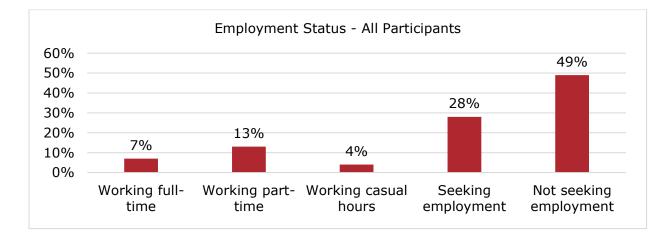


Employment

Procuring employment is difficult for many marginalized people and is one of the greatest barriers to moving toward a better life (Hynie, 2016; Gerber, 2014). Half of the participants (49%) were not seeking employment, thus, not considered to be in the labour market.

For those in the labour market only 13% were working full-time with an additional 32% working either part-time or in casual positions. Fifty percent (50%) of those in the labour market were seeking employment. Barriers to gaining and maintaining employment included a lack of housing or stable housing and the absence of a reliable means of being contacted, problematic substance use, and poor health. Discriminatory hiring practices and non-inclusive workplaces further contributed to the challenges of securing and retaining employment and are discussed in more detail further on in this report.

Because casual working hours are often very sporadic it was difficult to report the number of hours per week worked. Outliers to the data on hours per week worked skewed the mean thus the median measure of 20 hours per week was the most reliable middle measure. Hours per week worked ranged from less than 1 hour to 75 hours.

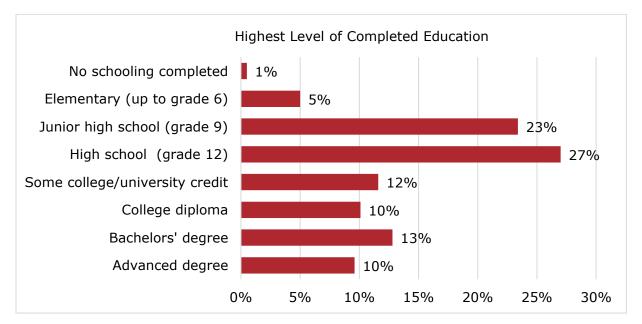


Education

The data about education strongly challenges stereotypes about marginalized people being uneducated. Twenty-seven percent (27%) of participants completed high school with only 29% with less than a high school education. The Edmonton CMA showed that 25% of the population completed high school and 10% had less than high school completion (2016 Census).

It is important to note that education holds differential value, and while it may provide some support to building a better life, it may not guarantee equal access to opportunities. Educational attainment for Indigenous Canadians reaps lower earnings than for non-Indigenous Canadians, regardless of the type of degree or diploma (Lamb et al, 2011). With the exception of very recent arrivals from the United Kingdom, the same wage gap exists for immigrants regardless of where they were educated (Ewoudou, 2011).

At the time of their interview, 35% of participants were attending school either full- or parttime. This proportion is heavily influenced by the number of NorQuest students (n=115, 19% of respondents) who participated in the study. A small majority (55%) of respondents were not planning to pursue further education, listing reasons such as poor health and disability (21%), being too old (13%), or feeling that further education was not needed (10%).



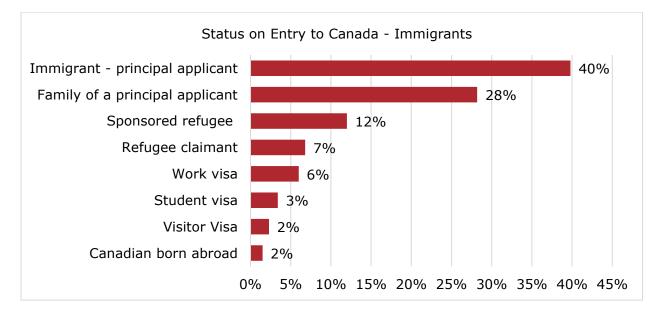
Immigrant Status

Forty-six percent (46%) of participants were immigrants, representing 69 countries of birth. The top five countries of birth in descending order were India, China, Philippines, Ethiopia, and Iraq. The median time in Canada was 5 years with a range of less than 1 to 59 years. A substantive majority (87%) of immigrant first languages did not include English or French. Almost all (98%) of those whose first language was an un-official language of Canada, were still able to speak that language at the time of interview.

Immigrants were asked about their status upon arrival in Canada. Entry status is indicative of the requirements to enter, the skills and human capital that immigrants arrive with, and the types of supports available to them once they arrive in Canada. For example, the accompanying family members of the principal applicant do not have to qualify under the point system.

Refugee claimants⁹ are somewhat disadvantaged in that they are not eligible for the same settlement services as refugees who were pre-screened and accepted before coming to Canada. While refugee claimants are waiting for their hearing they must pay foreign tuition if they wish to attend school. Furthermore, their social insurance number which is prefaced with a 9 is a clear indication of status that may be a detriment when seeking employment. People in Canada with a work visa that is not connected to a student visa are ineligible to attend school.

Government and privately sponsored refugees arrive in Canada to immediately become permanent residents, but they begin their life with a debt to the Canadian Government for their screening medical examinations and flights.



⁹ A refugee claimant is a person who arrived in Canada on a temporary basis but is seeking refugee status to remain in Canada. They are in the process of making a refugee claim and are working through the refugee determination process.

Language

Participants were asked about the first language they learned to speak as a child. Forty six percent (46%) reported English as their first language, 4% reported French, and the remaining 50% reported other languages. The other category included 61 languages with the top three first languages for non-Indigenous participants being Arabic, Spanish, and Mandarin. Indigenous participants whose first language was neither English nor French (n=51), predominantly reported Cree as their first language (n=36).

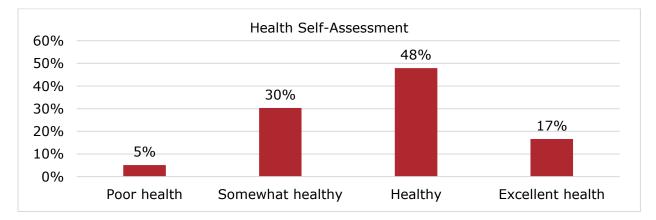
Health and Problematic Substance Use

While health is an overarching factor in building a better life, the decision with this project was to ask a limited number of general health question related to chronic illnesses and/or disability, problematic substance use, and general level of health. The researchers felt that the issue of health and marginalization warrants in depth study but their goal was to collect preliminary data to inform further research. Health data reported in this study is based on self-reports.

Participants were asked to rate their health using a scale of 1 to 4 where 1 means *poor health* and 4 means *excellent health*. Thirty-nine percent (39%) indicated having a chronic medical condition or disability. More than one-third (37%) of those who indicated having a chronic health condition also saw themselves as being healthy or in excellent health.

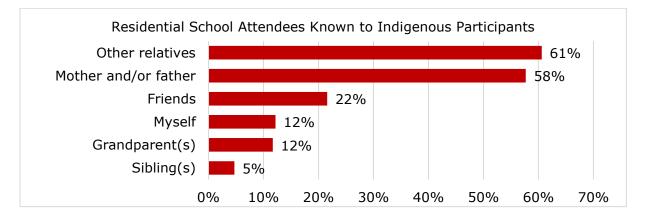
Twenty-two percent (22%) reported having a problem with substance use in the last 12 months. Forty-five percent (45%) of these participants indicated being healthy or in excellent health, however, those without problematic substance use were more likely to report good health.

While the explanation of health could be interpreted as chronic medical conditions being well managed, our community collaborators offered another possible explanation. They reported that their clients often ignore symptoms and just live with chronic health conditions when their basic needs are not being met or when their lives are in crisis. These clients are more likely to acknowledge and access treatment for chronic medical problems when their lives are more stabilized and there is a possibility to access help. This theory also fits with Maslow's Hierarchy of Needs in that when one is dealing with their very basic needs, other needs are not acknowledged or addressed (Maslow, 1943).



Residential Schools

More than one third (35%) of participants were Indigenous and the large majority of them (89%) knew someone who attended residential school. A much smaller proportion (12%) attended residential school. Trauma passed down through a family is referred to as intergenerational trauma while trauma experienced as a group is collective trauma (Bombay, 2013). Bombay explains that intergenerational effects foster enduring negative experiences that contribute to disparities in well-being, while collective trauma creates risk for negative outcomes related to health and social well-being (2013).

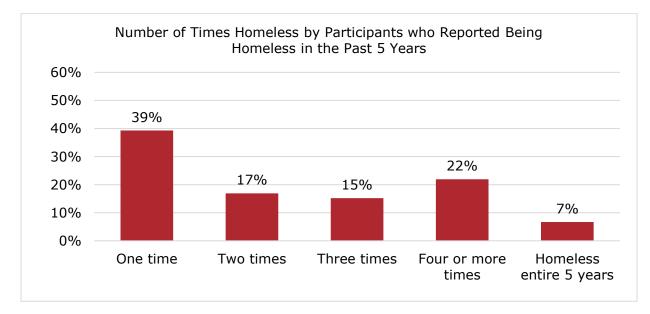


Homelessness in Canada

In this study homeless was defined as the lack of permanent stable housing including those who were staying in shelters or couch-surfing. Our question about homelessness related only to being homeless in Canada.

Forty-five percent (45%) of respondents reported being homeless at some point in their lives, and one in four (26%) did not have permanent housing at the time of interview. Participants were asked how many times in the past 5 years they had been homeless, and the cumulative period of time for all episodes of homelessness in the past five years.

Within the past 5 years, the mean time homeless was 2.09 years. Seven percent (7%) of respondents were homeless for the entire five years.



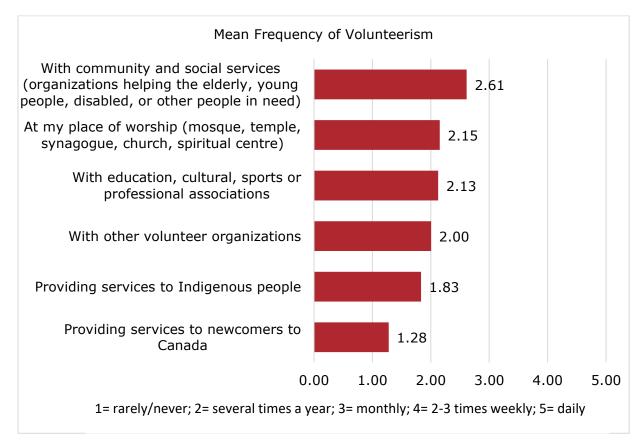
Volunteerism

Volunteerism often engages people with community, and exposes them to situations and people who they would not otherwise associate with (Omoto, 2002; Arai & Pedlar, 1997; Murray, 2000). Stolle (1998) points to the trust benefits of volunteerism, "time spent in groups with foreigners, or in groups with weaker ties, affects the generalized trust levels of the members" (p. 497).

More than half (54%) of participants volunteered in the past twelve months. There was a wide range of understanding as to what volunteerism means, and while some see it as helping a friend in need, others see it as a formalized commitment. Some saw their religious participation as volunteerism, whether attending a formal service or participating in organized activities at a religious centre. Overall, the rate of volunteerism was 10% higher than for the general Edmonton population (Census 2016). This spirit of giving back to the community and helping others was found throughout the project and across locations.

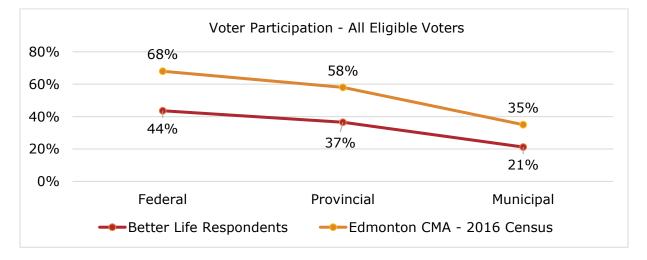
Respondents were asked where they volunteered, and to indicate their frequency of volunteering from the options of *rarely or never, several times a year, monthly, 2 to 3 times a week,* and *daily.* The frequency of volunteering is presented as a mean of these five measures, thus the higher the mean the more one volunteered. These means are presented only for those who indicated that they had volunteered.

The three most common types of volunteerism reported were *with community and social services agencies, at my place of worship* and *with educational, cultural, sports, or professional associations* with people volunteering between *several times a year* and *monthly.* The mean frequency of volunteerism with other non-specified volunteer organizations fell on the *several times a year* measure. Frequencies for volunteering to provide services to Indigenous people or newcomers to Canada fell between the *rarely or never* and *several times a year* category.



Voting

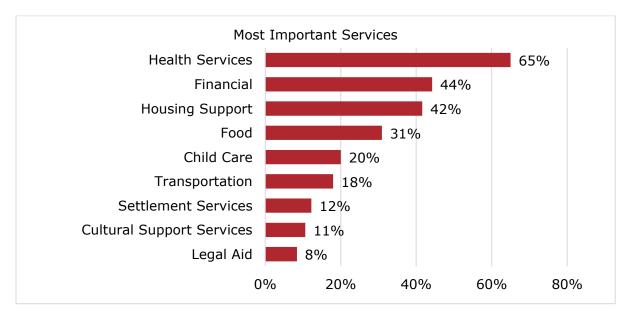
Nakhaie's (2006) research finds that Social Capital more strongly predicts voter turnout than socio-economic status. This research is supported by our findings in that respondent voter participation was only slightly lower than that of the general public. This level of participation was an unexpected outcome given the barriers to voting faced by many participants such as not having a permanent address or personal identification.



Most Important Services

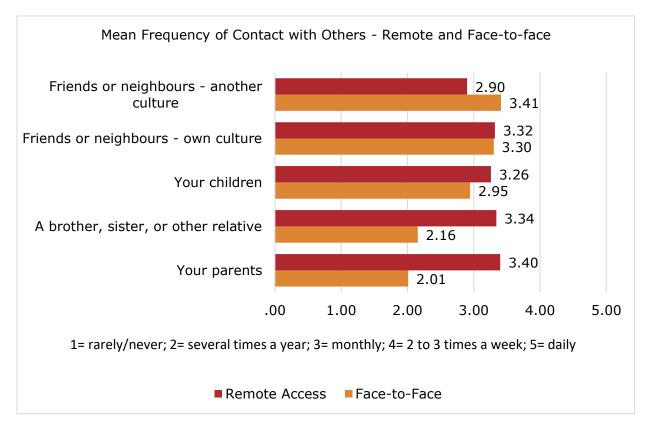
Selecting from a list of services, participants were asked to choose the three most important services they used either the past year or in the time when they had most needed help. A substantive majority (65%) listed health services as most important.

While responses about health, settlement, or cultural support were focused primarily on need, those related to the other components were related to need and finances. For example, respondents often talked about, not just needing child care, but having enough money to pay for child care.



Contact with Others

Respondents were asked about the frequency of their contact with others; both face-to-face contact and remote (via phone, skype, internet, etc.) using a scale of 1 to 5 where 1 means *rarely or never*, and 5 means *daily*. Means for each measure are shown, and the higher the mean, the more frequent the contact.



Support Systems

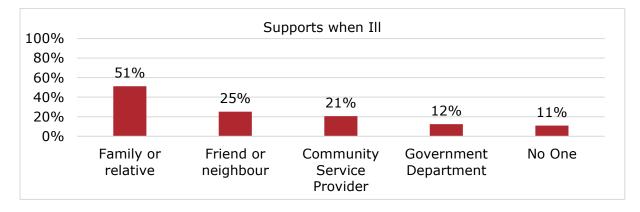
Participants were asked who they would call on if they needed support in a variety of situations including *dealing with illness, personal or family matters, looking for a job or housing, feeling sad,* or *needing money*. Listed choices were *family or relative, friend or neighbor, community service provider, government department,* and *no one.* Participants selected all the sources that applied to them.

Overall, family and relatives were most often called on for support, followed by Community Service Providers, then friends or neighbours. The strong trust for Community Service Providers was demonstrated by the proportions of respondents who would call on them for support in any given situation. A small group of respondents (9%) would ask no one for help for any of the listed situations.

Graph percentages do not add up to 100% because respondents selected multiple sources of support and also provided answers on other sources of help they would access which account for small percentages and are not included in the tables. The other sources of help included internet research, faith and/or prayer, and in the case of needing money, money lenders such as Money Mart.

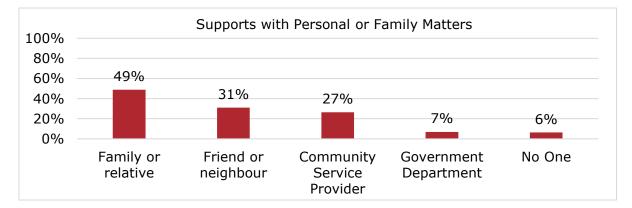
Supports when Ill

Participants were asked who they would call for support if they were ill and needed help with everyday tasks such as getting groceries, cooking, and laundry. Half of the respondents (51%) would turn to family or relatives for help in this situation.



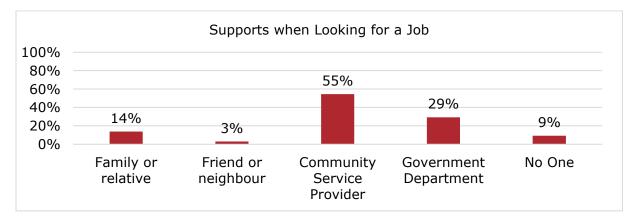
Supports with Personal or Family Matters

Family or relatives were the most common source of support for advice about a serious personal or family matter.



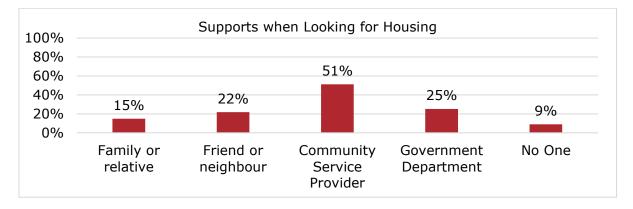
Supports when Looking for a Job

Respondents were asked who they would turn to for help to look for a job. For job seeking help, participants used fewer personal contacts, only 3% chose friend or neighbor and 14% chose family or friend, while the majority (55%) chose Community Service Provider.



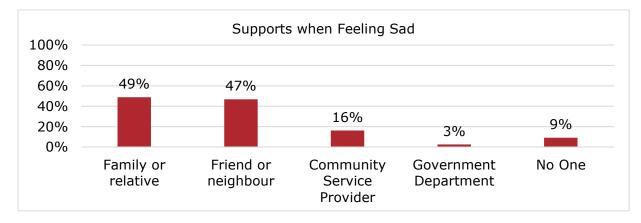
Supports when Looking for Housing

When looking for housing, participants were most likely to contact Community Service providers (51%) followed by Government Departments at 25%.



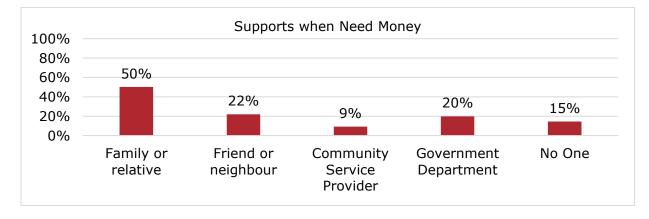
Supports when Feeling Sad

Almost half of respondents (49%) would contact family or relatives if they felt sad and needed someone to talk to, followed closely by friends or neighbours at 47%.



Supports when Need Money

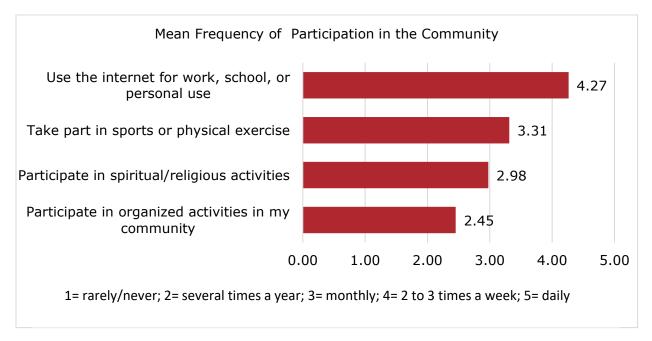
When needing money, half (50%) of the respondents would contact family or relatives. Twenty-two percent (22%) would ask a friend or neighbour for help.



Activities and Participation

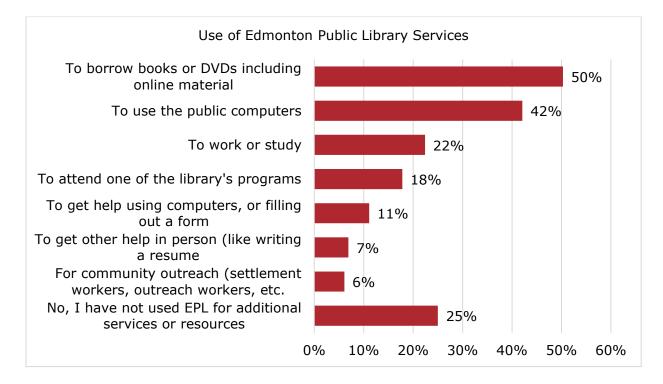
Participants were asked about the frequency of their participation in a variety of community events such as *sports, religious,* or *other organized activities*. Responses were on a scale of 1 to 5 where 1 means *rarely or never,* 2 means *several times a year,* 3 means *monthly,* 4 means *2-3 times a week,* and 5 means *daily.*

In addition to these physical connections to the community, participants were asked how often they *used the internet for either work, school, or personal use*. These questions were asked to ascertain the frequency with which they connect virtually to a community. The highest participation was in *using the internet for work, school, or personal use* where the mean (4.27) usage fell between 2-3 times a week and daily.



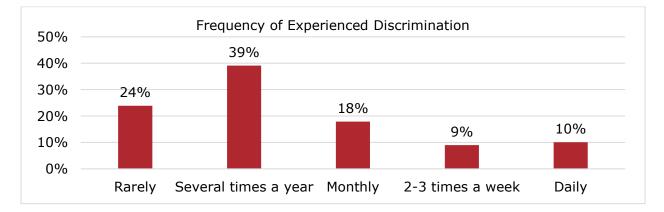
Use of Edmonton Public Library (EPL) Resources

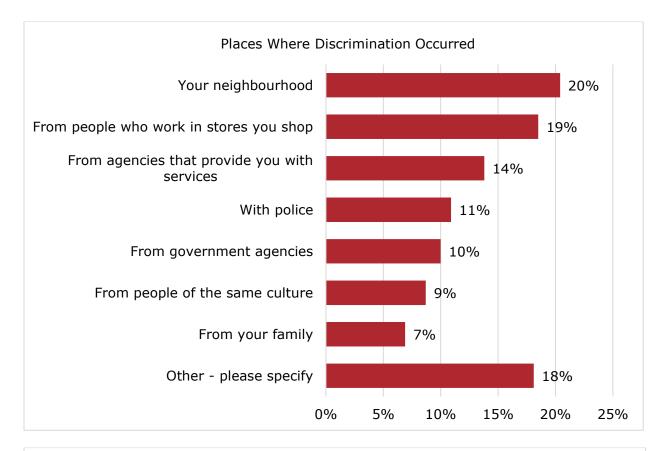
The EPL was interested in learning which of their services were utilized by participants who were asked to select all the EPL services they used in the past year. The most popular service was borrowing books or DVDs (including online materials) at 50% of respondents. Forty-two percent (42%) came to the library to use public computers, followed by working or studying and to access various types of help. One in four respondents reported not using the EPL services in the past year.

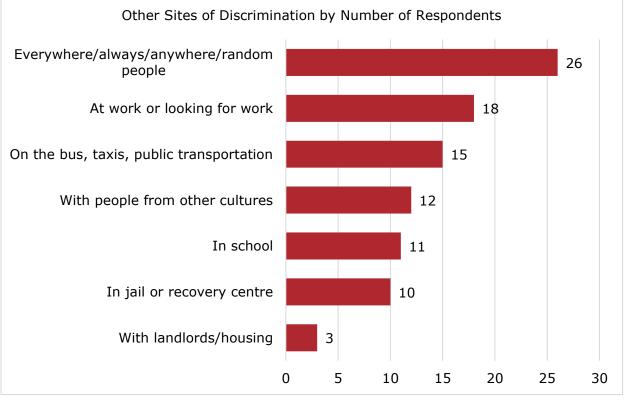


Discrimination

Discrimination was described as *unjust treatment because of race, age, economic situation, or gender.* Sixty-one percent (61%) of respondents indicated that they experienced discrimination. Thirty-seven percent (37%) of those who experienced discrimination reported monthly or more experiences and 1 in 10 reported dealing with discrimination on a daily basis. Discrimination occurred in a variety of places and was initiated widely. The first table shows proportions of respondents experiencing discrimination. The second table shows where discrimination occurred, and the third table provides a further break-down of the *other* locations referred to in the second table.







Social Capital Components

The components of Social Capital are encompassed in 36 statements that are measured using a 4 point Likert scale. These statements fall into six themes that provide an overview of our understanding of Social Capital. The development of these measures was informed by a variety of studies used nationally and internationally as well as input from community collaborators who work with the populations we were seeking to understand. These measures were determined to be a fit for bridging and bonding relationships and what is needed to form them.

The Social Capital measures were designed specifically for the community of participants in this study. While they have the potential to be used broadly as a starting point, the questions should be specific to the group under study. To further understand the formulation of the Social Capital matrix for this study please refer to the Methodology chapter of this report.

Respondents were asked to rate the frequency of feelings in response to 36 statements using a scale of 1 to 4 where 1 means *never*, 2 means *sometimes*, 3 means *most of the time*, and 4 means *always*. The 36 statements are listed below by theme.

Social Capital Likert Scale Measures

Loneliness (Lack of Loneliness)

I feel cheerful and in good spirits I feel calm and relaxed I feel active and energetic My daily life is interesting I feel nervous and tense I feel lonely I feel sad

Feelings of Connection to Others

Feel part of a group of friends Feel that you are no longer close to anyone Have company or companionship when you want it Feel lonely, even when you are with other people

Feelings About Self

I am satisfied with myself I am willing to help make my commutations I have many good qualities better I am able to do things as well as other people I have some influence to make my

Trust for Service Providers

Alberta Government services Legal system Health care professionals Emergency services Community services

Trust for Others

People in my neighbourhood People who work in stores where I shop People from other cultures My family People from my culture

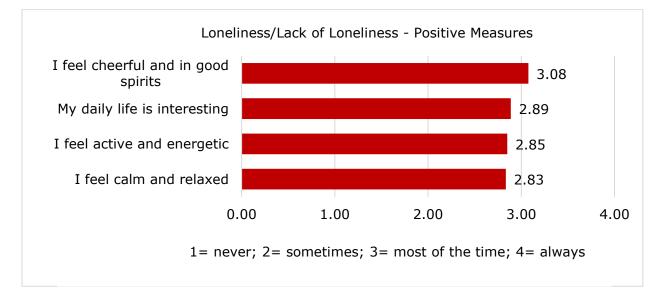
Community Engagement

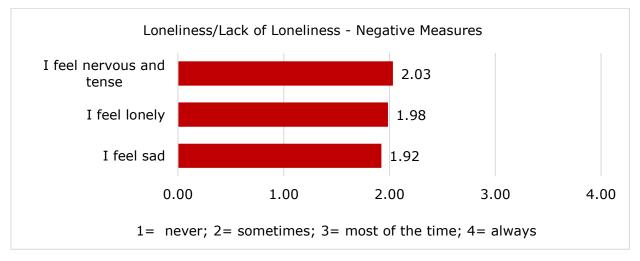
I feel connected to the community I live in I feel connected to my family and friends I feel connected to others from my culture I feel like I belong around the people that I know I participate in my community I participate in events with friends and family I participate with people from other cultures I am free to decide how to live my life I feel appreciated by others I am willing to help make my community better I have some influence to make my community better I feel safe in my community

Loneliness

Seven statements about loneliness were drawn from the UCLA Loneliness Scale using a scale of 1 to 4 where 1 means *never*, 2 means *sometimes*, 3 means *most of the time*, and 4 means *always* (Russel, 2010).

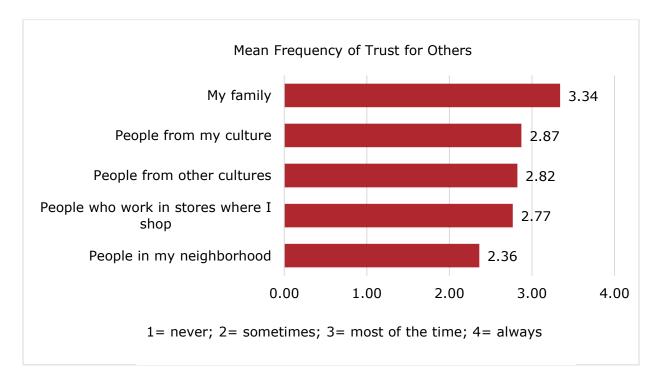
The following graphs contain the Social Capital theme components showing the statements as presented to participants. The positive statement measures were; *I feel cheerful and in good spirits, my daily life is interesting, I feel calm and relaxed, and, I feel active* and *energetic.* The negative statement measures were; *I feel lonely, I feel tense,* and *I feel sad.*





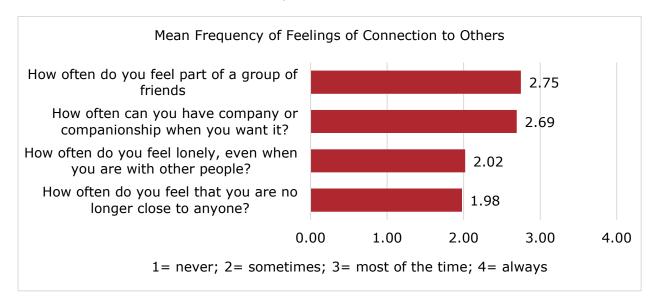
Trust for Others

Respondents were asked to rate their trust for others in a number of areas, using a scale of 1 to 4 where 1 means *never*, 2 means *sometimes*, 3 means *most of the time*, and 4 means *always*. If they had no contact or experience with the specific groups, they could choose *no contact* and were excluded in the measurement. While the mean trust for family was highest at 3.34, between *most of the time* and *always*, respondents who did not trust family members most often attributed their lack of trust to different life goals. For example, for immigrants it was disagreements about embracing the new culture or retaining traditional culture and values. For Indigenous participants the breakdown in family trust could be tied to leaving traditional lands to live in the city.



Feelings of Connection to Others

Respondents were asked about their feelings of connection to other people, using a scale of 1 to 4 where 1 means *never*, 2 means *sometimes*, 3 means *most of the time*, and 4 means *always*. A high score on the first two measures, *How often you feel part of a group of friends*? and *How often you can have company or companionship when you want it*? signified feeling connected and participants scores ranged between *sometimes* and *most of the time*. Conversely, a high score on the subsequent two measures, *How often do you feel lonely*? and, *How often do you feel you are no longer close to anyone*? signified not feeling connected and scores fell almost exactly on *sometimes*.



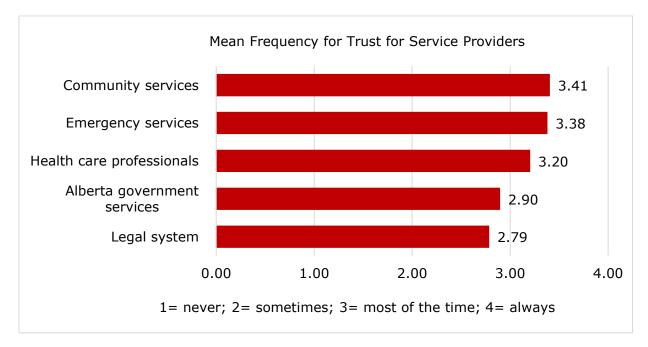
Feelings about Self

Participants were asked to judge the frequency of their feelings about themselves, using a scale of 1 to 4 where 1 means *never*, 2 means *sometimes*, 3 means *most of the time*, and 4 means *always*. The data shows the resilience of the respondents and their ability to retain their self-esteem in the face of their many daily challenges. The measures that fell between values of 3 and 4 indicated sentiments felt *most of the time* to *always*.



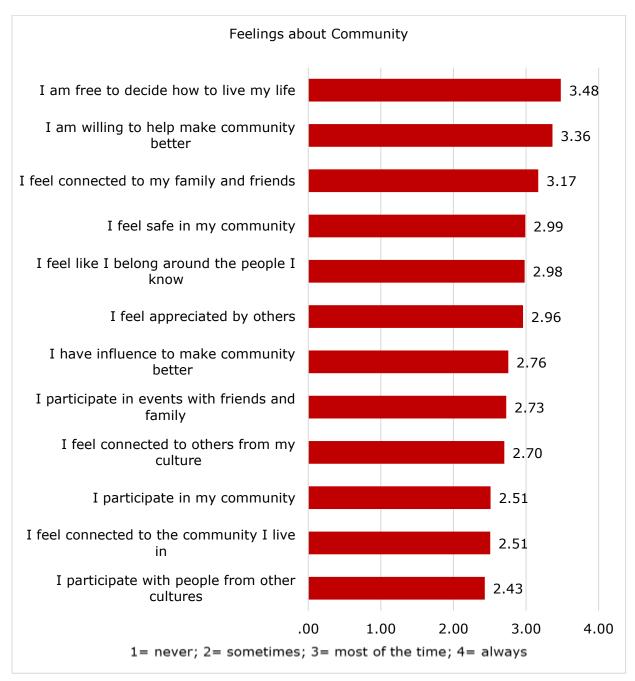
Trust for Service Providers

Participants were asked to rate the frequency of feelings of trust for agencies, using a scale of 1 to 4 where 1 means *never*, 2 means *sometimes*, 3 means *most of the time*, and 4 means *always*. The level of trust in community serving agencies is evident in the high mean (3.41), falling between trusting *most of the time* and *always*.



Community Engagement

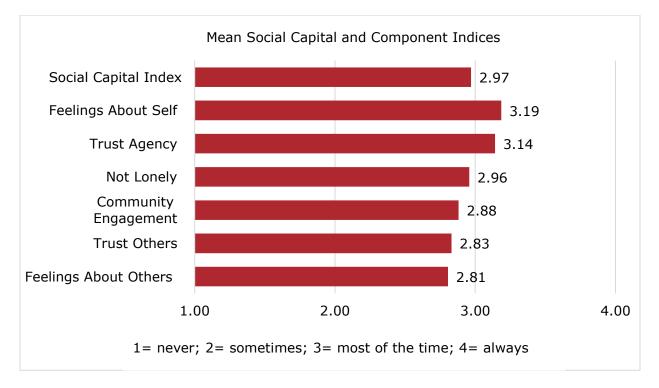
Participants were asked to rate their frequency of feelings about their community on a number of statements using a scale of 1 to 4 where 1 means *never*, 2 means *sometimes*, 3 means *most of the time*, and 4 means *always*. The statements with the two highest scores were *I am free to decide how to live my life* at 3.48 and *I am willing to help make my community better* at 3.36. These measures indicate a high level of autonomy and a keen interest in contributing to the community. They also challenge the stereotype of marginalized people as helpless victims.



Social Capital Indices

The Social Capital components were used to create six indices. The sets of questions pertaining to loneliness or lack of loneliness and feelings about connection to others had both positive and negative statements. The negative statements were recoded so that the directionally compatible measures could be indexed. For all six of the indices a high score means a high positive measure. As the responses to statements within each theme were significantly correlated, they were indexed to offer one measure for each of the six themes.

Finally, the measures for the six components were also significantly correlated, allowing these measures to be indexed to form one quantitative measure for Social Capital, the *Social Capital Index*. The higher the score, the more Social Capital one has (measure ranged from 1 to 4).



Causal Relationships

To learn about the causes related to the six themes of Social Capital, multiple regression analysis was employed using the following measures as independent (causal) variables.

Gender Attachment Age Self-reported health Education Employment Currently attending school Problematic substance use in last 12 months Frequency of participation in religious activities Ever homeless in Canada Discrimination frequency Residential school attendance (Indigenous regression) Years in Canada (Immigrant regression)

The following table provides an overview of the regressions showing the variables that had significant effects in each of the following themed indices, and whether the significant influences were positive or negative.

	Age	Health	Spiritual or Religious	Substance Problem	Discrim/ ination	Ever Homeless
Lack of Loneliness	positive	positive	positive	negative	negative	
Trust for Others	positive	positive			negative	negative
Feelings of connection to others		positive	positive		negative	negative
Feelings about Self		positive	positive			
Trust for Service Providers				negative	negative	negative
Community Engagement		positive	positive	negative	negative	
Social Capital		positive	positive	negative	negative	negative

Lack of Loneliness Index

The Lack of Loneliness Index consists of seven Likert scaled measures. Data from three statements was recoded so the direction across measures was consistent, meaning that the higher the measure, the less lonely one is.

The following regression model explains 20% (adjusted $r^2 = .197$) of the fluctuation in loneliness. Three variables significantly contribute to decreasing loneliness: age, overall health, and participation in spiritual or religious activities. Two variables significantly contribute to increasing loneliness: problematic substance use in the past 12 months, and frequent experiences of discrimination. All significant measures are indicated in bold in the table.

	Unstandardized Coefficients		Standardized Coefficients		
	В	Std. Error	Beta	t	Sig.
(Constant)	2.282	.171		13.379	.000
Male=0; female=1	021	.046	019	470	.639
Unattached=0; attached=1	073	.044	067	-1.633	.103
Age	.005	.002	.099	2.267	.024
Overall health: 1=poor to 4=very healthy	.232	.028	.341	8.175	.000
Highest level of education: 8 measures: none to advanced degree	016	.013	054	-1.223	.222
Employed: no=0 yes=1	002	.051	002	042	.966
Currently attending school; no=0 yes=1	017	.026	028	632	.527
Problem with substance in the last 12 months: no=0 yes=1	168	.056	130	-2.993	.003
Participate in spiritual/religious activities: 5 measures low to high	.036	.014	.105	2.622	.009
Ever homeless in Canada: no=0 yes=1	050	.055	046	897	.370
Frequency discrimination: 5 measures low to high	036	.014	103	-2.535	.012

Trust for Others Index

The Trust for Others Index comprises five Likert scaled statements. Seventeen percent (17%) (adjusted $r^2 = .169$) of the change in trust for others can be explained by the measures in the following regression. Age and health are positive factors in the trust of others. Conversely, having ever been homeless in Canada and experiencing discrimination frequently, both decrease trust for others. All significant measures are indicated in bold in the table.

	Unstandardized Coefficients		Standardized Coefficients		
	В	Std. Error	Beta	t	Sig.
(Constant)	2.551	.218		11.716	.000
Male=0; female=1	032	.058	023	546	.585
Unattached=0; attached=1	060	.057	045	-1.062	.289
Age	.006	.003	.098	2.216	.027
Overall health: 1=poor to 4=very healthy	.100	.036	.117	2.761	.006
Highest level of education: 8 measures: none to advanced degree	.004	.017	.010	.227	.820
Employed: no=0 yes=1	.118	.065	.074	1.830	.068
Currently attending school; no=0 yes=1	005	.034	006	138	.890
Problem with substance in the last 12 months: no=0 yes=1	014	.072	009	195	.846
Participate in spiritual/religious activities: 5 measures low to high	.014	.018	.032	.799	.425
Ever homeless in Canada: no=0 yes=1	289	.071	214	-4.080	.000
Frequency discrimination: 5 measures low to high	096	.018	218	-5.286	.000

Feelings of Connection to Others Index

The Feelings of Connection to Others Index includes four Likert scale variables. Two of the measures on the Feelings of Connection to Others index were recoded so the direction across measures was consistent, meaning that the higher the measure the stronger connections to others.

The regression explains 11% of the change in feelings of connection (adjusted $r^2 = .114$). Four independent variables have significant effects on this index. Good health and participation in spiritual or religious activities contribute positively to feelings of connection, while having ever been homeless and frequently experiencing discrimination negatively affect feelings of connection. All significant measures are indicated in bold in the table.

	Unstandardized Coefficients		Standardized Coefficients		
	В	Std. Error	Beta	t	Sig.
(Constant)	2.377	.211		11.245	.000
Male=0; female=1	066	.057	051	-1.168	.243
Unattached=0; attached=1	.031	.055	.024	.554	.580
Age	.001	.002	.013	.292	.770
Overall health: 1=poor to 4=very healthy	.147	.035	.184	4.198	.000
Highest level of education: 8 measures: none to advanced degree	.016	.016	.044	.947	.344
Employed: no=0 yes=1	.113	.063	.075	1.805	.072
Currently attending school; no=0 yes=1	039	.033	056	-1.207	.228
Problem with substance in the last 12 months: no=0 yes=1	079	.070	052	-1.139	.255
Participate in spiritual/religious activities: 5 measures low to high	.044	.017	.108	2.572	.010
Ever homeless in Canada: no=0 yes=1	147	.069	116	-2.135	.033
Frequency discrimination: 5 measures low to high	047	.018	113	-2.656	.008

Feelings about Self Index

The Feelings about Self Index includes three Likert scale variables. The independent variables in the regression model account for 9% of the change in feelings about self (adjusted $r^2 = .090$). Two variables significantly affect feelings about self. Good health and participation in spiritual/religious activities both have a significant positive influence. All significant measures are indicated in bold in the table.

	Unstandardized Coefficients		Standardized Coefficients		
	В	Std. Error	Beta	t	Sig.
(Constant)	2.509	.211		11.864	.000
Male=0; female=1	.007	.057	.006	.128	.898
Unattached=0; attached=1	093	.055	074	-1.690	.092
Age	.004	.002	.078	1.668	.096
Overall health: 1=poor to 4=very healthy	.190	.035	.240	5.413	.000
Highest level of education: 8 measures: none to advanced degree	004	.016	011	237	.813
Employed: no=0 yes=1	025	.063	017	395	.693
Currently attending school; no=0 yes=1	010	.033	015	310	.757
Problem with substance in the last 12 months: no=0 yes=1	085	.070	057	-1.227	.220
Participate in spiritual/religious activities: 5 measures low to high	.040	.017	.101	2.381	.018
Ever homeless in Canada: no=0 yes=1	.002	.069	.002	.033	.974
Frequency discrimination: 5 measures low to high	033	.018	081	-1.871	.062

Trust for Service Providers Index

The Trust for Service Providers Index includes 5 variables. The independent variables in this regression explain 20% of the change in trust for agencies (adjusted $r^2 = .202$). Three variables have negative effects on trust for agencies: problematic substance use, ever being homeless in Canada, and the frequency of discrimination. All significant measures are indicated in bold in the table.

	Unstandardized Coefficients		Standardized Coefficients		
	В	Std. Error	Beta	t	Sig.
(Constant)	3.094	.225		13.769	.000
Male=0; female=1	032	.060	022	533	.594
Unattached=0; attached=1	061	.059	043	-1.050	.294
Age	.001	.003	.016	.377	.706
Overall health: 1=poor to 4=very healthy	.048	.037	.053	1.284	.200
Highest level of education: 8 measures: none to advanced degree	.022	.018	.056	1.275	.203
Employed: no=0 yes=1	.097	.067	.057	1.454	.147
Currently attending school; no=0 yes=1	.008	.035	.010	.220	.826
Problem with substance in the last 12 months: no=0 yes=1	161	.074	094	-2.171	.030
Participate in spiritual/religious activities: 5 measures low to high	.028	.018	.061	1.541	.124
Ever homeless in Canada: no=0 yes=1	185	.073	131	-2.538	.011
Frequency discrimination: 5 measures low to high	138	.019	296	-7.330	.000

Community Engagement Index

The Community Engagement Index includes twelve Likert scale variables. Eighteen percent (18%) of the fluctuation in the Community Engagement Index can be explained by the regression (adjusted $r^2 = .183$). Health and participation in spiritual/religious activities positively affect feelings of connection and participation in the community. Negative effects include problematic substance use and the frequency of discrimination. All significant measures are indicated in bold in the table.

	Unstandardized Coefficients		Standardized Coefficients		
	В	Std. Error	Beta	t	Sig.
(Constant)	2.344	.184		12.761	.000
Male=0; female=1	.049	.049	.042	1.007	.315
Unattached=0; attached=1	079	.048	069	-1.658	.098
Age	.003	.002	.055	1.254	.210
Overall health: 1=poor to 4=very healthy	.123	.031	.169	4.025	.000
Highest level of education: 8 measures: none to advanced degree	001	.014	003	071	.943
Employed: no=0 yes=1	.030	.055	.022	.548	.584
Currently attending school; no=0 yes=1	.009	.028	.015	.335	.738
Problem with substance in the last 12 months: no=0 yes=1	157	.061	114	-2.596	.010
Participate in spiritual/religious activities: 5 measures low to high	.075	.015	.203	5.054	.000
Ever homeless in Canada: no=0 yes=1	034	.060	030	578	.564
Frequency discrimination: 5 measures low to high	074	.015	196	-4.814	.000

Social Capital Index

The Social Capital Index is made of the six indices that are the components of Social Capital. Five independent measures in the regression equation have a significant influence on Social Capital, accounting for 27% of the change in Social Capital (adjusted $r^2 = .274$). Problematic substance use, the frequency of experiencing discrimination, and having ever been homeless in Canada negatively affect Social Capital. Health and the frequency of participation in spiritual or religious activities positively affect Social Capital.

For participants who reported having a problem with substance use in the last twelve months, Social Capital was 11% of one measure lower than for other participants. There is 99% surety that this difference is not due to chance (b=-.106; p=.019). The frequency of discrimination also has a negative effect on Social Capital. For each measure of increase in discrimination, Social Capital decreases by 7% of one measure (b=-.072; p=.000). Finally, having ever been homeless in Canada negatively affects Social Capital with a decrease of 12% of one measure (b=-.120; p=.007).

	Unstandardized Coefficients		Standardized Coefficients		
	В	Std. Error	Beta	t	Sig.
(Constant)	2.564	.136		18.900	.000
Male=0; female=1	033	.036	036	897	.370
Unattached=0; attached=1	057	.035	064	-1.624	.105
Age	.003	.002	.074	1.776	.076
Overall health: 1=poor to 4=very healthy	.133	.023	.236	5.925	.000
Highest level of education: 8 measures: none to advanced degree	.004	.011	.017	.399	.690
Employed: no=0 yes=1	.054	.040	.051	1.336	.182
Currently attending school; no=0 yes=1	010	.021	019	455	.649
Problem with substance in the last 12 months: no=0 yes=1	106	.045	098	-2.361	.019
Participate in spiritual/religious activities: 5 measures low to high	.041	.011	.142	3.736	.000
Ever homeless in Canada: no=0 yes=1	120	.044	134	-2.718	.007
Frequency discrimination: 5 measures low to high	072	.011	245	-6.326	.000

Being healthy has a positive influence on Social Capital where for each measure of better health one was 13% of one measure higher on the Social Capital Index (b=.133; p=.000). Participation in spiritual or religious activities also positively affects Social Capital. For every increased measure in the frequency of participation, Social Capital increases 4% of one measure (b=.041; p=.000).None of the other measures in the regression equation significantly affect Social Capital.

3. All Participants – Focus Groups

This chapter presents the qualitative data drawn from the 50 focus group discussions that took place in the community, and one focus group with collaborating agencies. Additional information was gathered through research assistant (RA) observations and debriefs, and from long answer questions in the survey.

The focus group participants shared their lived experiences about the ways they attempted to improve their lives and build their Social Capital. The intent of this section is to give voice to the participants. Their voices are presented in italics. To learn what participants needed to build a better life the focus was on two main questions. The first is: *What do people need to build a better life?* This question sought to gain insight into needs, but also to understand how a better life was defined at the individual level.

The second question is: *What is belonging?* This question related to the themes on the Social Capital measures. After each data collection session, the research team met to debrief and share perspectives. Finally, open-ended responses and notes in the margins of questionnaires informed the analysis. Due to the heterogeneous nature of the focus groups many of the quotes are not attributed to a specific subgroup.

What do people need to build a better life?

For the majority of participants, a better life was defined as having basic needs met. When asked what building a better life meant to them, they identified obtaining stable and independent housing and finding employment that provided a secure living wage.¹⁰

Participants talked about needing to meet basic necessities in order to be able to focus on developing other parts of their lives. In other words, without having basic needs met, it was difficult to form the bonds that allow and foster community participation, to maintain close ties with others, or to pursue further education or training.

Housing

Housing was identified as a primary need to build a better life. Not only did participants want access to housing, they wanted the safety and stability that provides an environment conducive to making connections to build Social Capital.

You don't want to go to school when you're poor or homeless. Those aren't things on your list.

In order to move in any direction, you have to have a good home base. If you don't have that, you're literally under threat every few months.

I was able to get my own home instead of being homeless, I started working, I started being a productive community member, for me it was yeah, I had to address my personal problems first and then get my physical part, getting a home, getting a job and stuff like that, it took time, it took a long time.

I was such a terrible mom because *I* was put in a situation where *I* was homeless.

¹⁰ Living Wage Canada defines a living wage as a wage that reflects what earners in a family need to bring home based on the actual costs of living in a specific community.

Having a home, having stability, having a place long enough that you're in one place, and your instinct is to flee, your instinct is to get out, but the longer you stay there, you understand – wait a minute, this is good for me, this is home, this is healthy, this is happiness.

For other respondents, housing stability was challenged by changing requirements and rules, resulting in loss of trust in services and diminished belief in their futures.

Now that the program has changed, I don't get subsidies anymore. Which leaves me \$500 more in a hole than I was before. I've gotten a months' notice but even then it doesn't give me enough time to re-budget.

I don't believe ending homelessness is anything that is really going to happen. But I do believe that they have damaged a lot of homeless people even more by not being consistent. The government is supposed to be something we all trust but we all know you can't. They're not consistent.

While important for everyone, safe and sustainable housing was especially important for individuals who were recovering from addictions or were newly housed or leaving incarceration, as distance from influences may be helpful. However, it must be noted that being away from one's former community may also be isolating. Positive support to maintain the path to a better life must be in place.

I feel like they made too many rules for homeless people who end up getting a place to live. They made too many rules. You can't even meet in the back door. Let's say you wanted to go outside, you have to close the door. You can't open the door to let other people come in just to converse with other people.

Some of the restrictions they put on, like no roommates, they had to change that as they go along because they realize that people on the street or people who have had using histories tend to want community.

I feel like most of the time they just let you out of jail to be homeless.

I had to be quietly homeless, *I* had to be abused and dealing with addiction. *I* think about that and think that you have to be all of those before you can get help.

It's like a circle. The homeless are going back on the streets when there are [agencies that house people] trying to house the other ones.

For many respondents, the timeliness of securing housing was problematic. Wait times for affordable housing were difficult when one needed immediate housing. Exacerbating the issue for refugee respondents was the policy that makes them wait until after their first year in Canada to apply for subsidized housing. For them it was impossible to secure affordable housing at the end of their first year when their financial support from government or private sponsors ended.

They should have faster waiting lists, because sometimes when you're waiting for a house, or something within those lines, you're waiting for like three or four or five or maybe even six years for a place, and by that time you probably have a job, you probably have a car you know things like that.

Employment and Poverty

A substantive majority (3 in 4 respondents), including both employed and unemployed, reported incomes under the LICO. The poverty that many experienced meant they needed to make choices about which basic needs were most important.

That's alright. But to get the actual funding I need, to even have a room in a house, and enough money to eat and go to this program, I can't do that. There's no funding for that.

Having a better life is not possible without a having job. First we need a job.

You worry about your income, you worry about your job, your income... it makes you insecure.

When you're on welfare or something it seems like they just want to keep you stuck there because of your past experiences.

If it wasn't for the food bank here... I can't even remember the last time I was able to buy fruit.

You guys would actually cry if you see how much [Government Agency] helps me with four kids.

Another respondent talked about losing hope as help falls away.

Most people I have talked to are generally the same. Nothing that they [helping agencies] started with and told me in the beginning has stuck. They have turned around and taken the subsidies away. The subsidies for the people that were homeless are made in a way where you were able to afford the place you stayed in.

For those who had once lived a better life there was an understanding that the shift to poverty was possible for anyone. A respondent who had lived a life of abundance explained her path to poverty.

A huge barrier is money. I am so grateful at times for the life that I had with my family, but I married quite young and had children right away and I was able to work for the federal government for 20 years, we had good incomes, we bought a house. Things have totally changed as I had a separation, I had to split the house, did it in court and maybe I made some mistakes there in giving half that money away. Anyway, so, to this day, I've lived in subsidized housing and it has been a whole different flip, and although I was still working, then health became a problem. So I've lived actually two different lives and I'm grateful that I got to live the first life to know what it feels like to live out of poverty. Now I've lived in poverty for so many years (22) and you are able to weigh what options are attainable and which are not. I never wanted to admit that or seen that before. You love working and you love being out and about. Even money has a way of affecting your personality, your outgoing spirit. That even comes to affect, when it comes to 'no gas', no I'd like to go do something for someone, then it's kind of like, I can't even do that anymore, You can't waste the gas to go places. It has been an eye opener that I would never have seen coming. I'd never admit to anyone other than right now that money has a huge part in how you feel about yourself. It does even affect how much you can volunteer or give. That extra 10 dollars can help you make a casserole for that sick friend, and that makes you feel good. Of course the crunch has come in the last five years because the economy has gotten worse.

For those who did not have secure housing or access to a computer or cell phone, applying for and retaining employment was challenged by not having stable contact information.

I don't have a cell phone. And I have to stay home if someone is going to call for an interview or I have to go online or come here or go to the library because I don't have a computer.

Another respondent outlined the difficulty of not having a stable address when applying for jobs.

If they're saying, 'Well is this your address?' 'It is for now'. You have got to have that stability so you can actually launch off.

Sometimes, regardless of qualifications, the requirement of job experience was a barrier to attaining employment.

I just graduated from MacEwan but if you look at job postings they ask for 1 years, 2 years of experience. If you don't start from somewhere, how can you get the experience?

They needed a minimum of 3 years of experience. And it's frustrating. If you don't let me, like how am I going to get that experience?

Newcomers to Canada discussed some of their challenges in finding employment. Finding secure and sustainable employment can be problematic when job experience and skills from other countries are not recognized.

Having a better life is not possible without having a job. First we need a job. And to use our skills and qualifications. When we come to Canada, we bring our education experience and all those things. We need to build our lives here. So first we need to get a job and use our qualifications and feel they are useful here. We are strong, even if we are from Africa, we are strong, we can work, but nobody give us a job maybe because we don't have a high degree, or we are not white as you guys, but we can work anything.

When we go outside for job, they need level 2 and level 3. It's difficult to get level 2 and 3 and English language requirement is also very difficult. But I have more knowledge than level 2 and 3 workers.

A suggestion to recognize and account for the skills of newcomers was offered, and could compliment the International Qualifications Assessment Service (IQAS)¹¹ model with a more generalized skill assessment.

A skill assessment place that was recognized by the city. I would be able to show, I have my skill assessment. Even just standardized tests based on fields, something like that.

¹¹ IQAS Alberta assesses foreign-earned credentials for immigration or work and study. www.alberta.ca/international-qualifications-assessment.aspx

For those who had lapses in their educational trajectory from high school to post-secondary education, returning to school later in life was often challenging. However, for many participants, an education that led to a better job and a career, was how they defined a path to a better life. For participants with children, finding childcare or affordable childcare was often a barrier to employment or education.

But now I'm at a point where I'm tired of these minimum wage jobs and I want a better career for myself so I can afford more things for my children like after school programs and whatever programs they need. So I decided to come to school and put my needs first and my family and to get a better career.

I dropped out of school when I was 17 when I had my first daughter. For the past 10 years, I've been trying to come back to school. It's been kind of hard because not having proper care for my children or a reliable sitter and plus I would always help other people and putting their needs first above me and my children.

It's expensive for the day care and you would prefer taking care of your kids instead of putting them to day care.

Some help in child care would be the biggest thing. That's the main thing, for me, I can't do nothing because child care costs so much.

What is belonging?

The second question in the focus group discussions related to defining belonging. Much of the data from these discussions fell within the themes of Social Capital, focusing on what builds or erodes Social Capital.

Defining Belonging

Belonging was defined in a number of ways, some related to acceptance and others to being able to retain and practice ones' own beliefs and customs.

[Belonging] is just to fit in somewhere and being able to relate.

My ideas are considered and respected...would, for me, it would be belonging.

[Belonging] is having the freedom to do things as a group without being judged.

I would guess, belonging to me, is feeling like I fit I somewhere, and that I'm comfortable, and that I can express my views and my opinions and my perspective.

Belonging means, like, well to me, someone where you can be yourself and not have to, censor yourself and then, just be comfortable in your own skin.

You're not being judged you know. Being accepted you feel like you belong in a community where you belong. You don't have to explain where you came from, where you're going, you're just accepted.

This country is made of newcomers from what I understand. So I think that's the main factor, making you feel you are having a better life.

For newcomers to Canada, belonging in a new country can be a daunting process, but many understood that settlement takes time.

Belonging to Canada means you don't have to lose your culture, or tradition, or your country but how to merge with the Canadian culture which is multicultural. So we have to expect some kind of things over here which are very good and we can stick to our tradition too. So I think we have to just mingle with other kinds of culture because it's a multicultural. Yes, we are feeling lonely. We don't have that much financial, we are struggling financially too. Eventually, we are going to get it because it's a new country for each of us. We have to have patience.

When I came here, I lost my identity because back home I was doing things I like, adding value to my country. But belonging here would mean to do all those things that I was doing at home.

An Indigenous respondent talked about how she did not feel she belonged in her home community but found belonging through attending school.

But when I come here [school] I feel like I belong. I make a lot of friends; they make me feel welcome. They engage with my interests and we talk, we communicate. That's where I feel welcome.

Another person talked about how belonging to his Indigenous community helped to create belonging outside a repressive school environment.

When I was in grade school, I went in to a Roman Catholic school where there were 2 classrooms. One for white kids and one for native kids in northern Alberta, where we knew we didn't belong in the other class. But we did feel that we belong with each other. We knew that we belong in our families when we were little kids.

Trust

Trust in those around us is an important indicator of Social Capital. It's related to social well-being and connectedness to community. In essence, trust enables individuals to create stronger bonding networks, participate in their community, and subsequently expand their own social networks.

While trust is generally considered to be positive, it is important to keep in mind that when a person is marginalized, and especially if they are homeless, trust may not be a good survival strategy. The homeless are vulnerable to violence and abuse and must be careful about who to trust. For Indigenous participants, the residential school experience affected many generations and was a legacy that destroyed trust. Lack of trust made it difficult to access and engage in community. For immigrants to Canada, and more likely for those who came as refugees, having experienced war and displacement, learning how to trust could be challenging.

Trust is built when people feel confident about others and believe relationships are consistent. One respondent in a substance use recovery program talked about feeling safe for the moment, but still not trusting in the future.

The thing is that with these programs tell different things. You need consistency, you're not going to trust things you are still going to be on the edge. There's been a lot of people just cut off blindly from their subsidies.

You are talking about trust and I think when we have workers that follow through we feel brave enough to ask for help and not feel bad.

An Indigenous respondent talked about how the legacy of residential schools affected his thinking about trust, and how he changed his perspective.

I was very closed off and I didn't trust. There's that mentality that the white man and Aboriginal don't see eye to eye. You know, it's engraved in us from the residential school system and stuff like that. It's there. I found that for myself, I had to really be open and honest and direct and assertive about what I needed.

There were instances when participants expressed their lack of trust in the police.

Cops just want to hurt people and they have a stupid law behind them and they have a bad saying "*I have authority over humans and so I get to be a stupid ape and do whatever I want because the government says I can.*"

Immigrants generally trusted organizations that provide services to the community, praised the work being done, and were grateful to have access to services. For newcomers to Canada, this level of trust may be related to the recency of their arrival and a time referred to as the honeymoon period of settlement when they see Canada in only a most positive light. "Initially it's like a honeymoon, they are happy. That slowly changes, and other issues like employment... lead to frustration." (Drolet, 2010, 221).

Many immigrants come to Canada from countries where government and police corruption is the norm. By contrast, Canadian institutions appear to be much safer than those in their home countries. Individuals that come as sponsored refugees are provided one year of assistance and services such as basic health benefits, settlement services, and language training, all of which contribute to their trust in Canada and Canadians.

Some respondents did not trust that preventative supports kept families out of crisis. One participant felt that the government hastily breaks up families and takes children away from their parents when parents cannot support their children.

The whole family gets stranded, depressed. And the police are threatening the people on the street or threatening the communities, even threatening the families, making the families separate.

An HIV positive participant talked about distrust as a barrier to accessing services.

It's bad medicine, gossip, it travels and it changes and gets altered along the way and I don't even trust the professional people in my own community but I need to come to this city to get the professional help that I need, confidential, nonjudgmental support that I need. An agency worker and participant in a focus group described how trusting relationships with clients were built.

Well, we don't judge. They are always welcome to come. We have stuff to offer them and we are here to support them in ways that they need support. And if we can't offer them the right kinds of support, then we send them to someone that can help them. Then we always check up on them. We call them up and ask if there is anything we can do to help you. So we are really connected to the people we work with. It's not just work, we come here having this. I'm a mom, I have 6 kids but I can come here and have all these babies. Like these babies, I've known them since the womb and it's nice having that connection and be able to build that with all these families.

Connections & Feelings about Self

Being connected to a supportive community facilitates building a better life. Through community supports and networking, individuals can gain access to important supports and resources. More profoundly, communities also enable individuals to connect with others who may have similar experiences, and can provide the type of emotional and psychological support needed to overcome barriers and reduce feelings of isolation and loneliness.

Across all of the groups, building community enabled participants to form bonds of information where resources and supports were shared.

One thing that I like about this [community] is that it gave us opportunities to know the things that are happening in our community. Just resources that we weren't aware of ourselves.

I went to library by chance to access the internet, and then I found there's a settlement program. Then I was connected to a lady who connected me to other communities. In less than one month, I found my professional job.

A respondent from an ethnic group that was not well established in Edmonton, and did not have a community association or place of worship, discussed how her group found connection.

We just organize small prayer on the weekend and then we do a potluck and sharing and helping each other to keep that culture, that religion thing going on, and this is how we connect. So I miss that part. We don't have enough religious and cultural places to go...to like, feel like this is for....this is me, this is our culture, this is our place.

Many immigrants also discussed contact outside of their own ethnic communities that helped them to build connections and self-esteem.

If you speak when you come here and then you talk with someone that's not your culture, not your language after you speak with that person you walk like 5, 10 steps and your self esteem grows a little bit, you feel better.

But I like my neighbours, every neighbour, I connect with them. With different cultures, everybody knows me, I know everybody. I help with my community, I do some job to volunteer, donation. I'm okay with that. I'm an active person. I like to open my mind for everybody. I know we are different, that's okay.

A homeless participant discussed his community.

It's all different races. It's all different, everybody, you know. It's not just one group of people over here that are nice. We all come from different backgrounds. You have to take that into consideration. And then you make your friends on what you do or, how you look at yourself and then you associate with those people, or, those kind of people you want to be with or, hang out with... Sometimes, you could be drinking and you could have a really good time having a drink or, doing drugs or, whatever it is that day that you are doing with your friends. Sometimes you are not always smoking or, drinking or, doing drugs. Majority of the time, you are just trying to eat or, just trying to get by through the day.

Loneliness

Loneliness is an emotion experienced by most at some time in their life. For some it is a fleeting experience, but for others it is a lasting feeling that can be expressed by depression, anxiety and/or drug or alcohol abuse (Rokach, 2014).

While having few social connections may be a healthy choice for those who wish to live solitary lives, many respondents talked about loneliness in negative terms.

But I'm new here, I'm here only one and a half years. Still I'm struggling to settle down, me ... I don't find anyone "mine", everyone is busy, no one has time, only I get to talk to my family over phone, but they're also busy, I don't feel like anyone is connected to me, only my husband and my daughter.

You have to look a little harder when you are alone. Look at where you can participate or chat with someone during the day. It can get quite lonely otherwise. It's so easy to just stay in the house, then you'd never go anywhere or do that interaction.

I get lonely all the time. I don't like to be alone. The thing is I can't be alone. I'm in a very hard place.

We don't have relatives here, we feel as if we are very lonely.

Respondents shared ways they combat loneliness by engaging with those around them through spontaneous casual contacts, and organized activities.

I was thinking, yeah we don't have a village [to help with raising kids] and that structure we had a long time ago. I started talking to my neighbors.

If I'm lonely I just get in a bus and strike up a conversation with anybody. Just to talk to someone. Sometimes it's a happy conversation.

When my mom passed, I just wanted to quit. When I had my off days, I would text my friends and they would stop in and check on me and encourage me. I wouldn't be here if it wasn't for them.

Sometimes park activities work with different communities. It's really, I have to say, a very good place to meet people from different countries and different cultures all together in a city. Coming here [to the agency], it's like, for me and the kids, it just brings us together because when we're at home, we're a family but we're not. There's one kid here in this room, and there's one over here, and when we're here we get to sit with each other.

I sing in a church choir. *I* do, me and my wife, we sing in a church choir.

Chronic health or problematic substance use can be barriers to building relationships and subsequently increase loneliness.

That was the start of socializing and when you have an injury, it's amazing how it can put you into depression and it was socializing and the community that helped me get out of my depression.

It's a very lonely disease. It's really hard. To go through the weekend and I don't have bus fare to go visit. Neighbors won't let me use their phone because they're afraid of germs.

Self-Esteem and Self-Respect

Self-esteem and self-respect are core qualities to knowing one is worthy of building a better life, and in taking the steps in their journey forward. Barry (2010), found that positive self-esteem can serve as a protection with regard to how discrimination is perceived and experienced. Participants defined self-esteem and self-respect in terms of loving self.

I am going to need some self-love, self-awareness. We need to find ourselves and take our power back.

You have to learn to love and respect yourself.

I gave myself the opportunity to get my voice back I won't take no for an answer as long as I'm benefiting and bettering myself everyday and living just for me and not worrying about what anyone else thinks, I think that's the most important thing to take your power back.

Respondents also talked about their strategies to build self-esteem.

Connecting to a person on a human level it brings out more, more self-esteem.

Volunteering makes you feel like, more like you belong to the community, and it helps you.

We have to live in the four aspects of the medicine wheel, help the emotional, mental, physical, spiritual state.

Other respondents talked about the process of building self-respect and confidence.

So then, when you have that self-respect you start to feel more confident. And because of that confidence you can start to look at others and be easier with that trust. When you working with those kinds of people, I can be moving from one base to another base, it's very easy for me to have that confidence in that person that they know what they're doing. I can trust them, and I know I can sleep at night and they're on watch. You have to learn to love and respect yourself. You can take things like I took the program, it's a 20 week program where it teaches you, gives you the tools to re-identify with yourself, with your history. It gives you the tools to be proud of who you are no matter what judgement the world castes upon you. You can't live in someone elses shadow. They're not going to matter in a day, or a month, or a week or a year. You're going to matter in a year. So you can see the opportunity to stand up for yourself, learn healthy boundaries, learn healthy ways to look at things.

Supports

Respondents generally found support from agencies to be helpful, and often a lifeline to maintaining themselves and moving forward to build a better life. Many offered very positive comments and assessments of the support they have received from agencies and the communities they were part of.

While many had positive comments about services, challenges were also presented. Some participants were not aware that the type of support they required was available. Others did not understand the process to access support. Finally, the time of waiting for support is a time of no support.

It must also be noted that while support agencies were very aware of community needs, they were often limited by capacity and funding. Moreover, agencies often work with money that is allocated for short time periods, and much of their valuable time is spent writing proposals and seeking funding.

Comments of frustration were often related to government policies and programming that were seen as barriers to support. Participants saw systems as unjustly limiting their progress to a better life.

I am trying to get into subsidized housing for just two years until I am finished my school. There are people who live there who make much more than my family and who have lived there for 15 years. It would be good if they looked into who needs the help the most right now because we don't need subsidized housing for 15 years, just a couple of years to help get us on our feet.

I try to get support from health services for my mental illness, I leave voicemails, but they never call me back. I lose faith, like no one cares anymore.

Immigrants expressed frustration with the disconnect between their expectations and the reality of settling in Canada.

You have certificate. But you don't have experience. You can't challenge any other candidate who studied here because you have only the bridging course, you don't have Canadian experience.

When calculating the point system to get in to Canada we were recognized as highly skilled professionals. When you come here, you are zero. I did my Masters' degree back home.

So, coming here, just the newcomers, the immigrants, when they come here they find out it is the opposite of what they have been told so yes, it does just smash them down.

They needed a minimum of 3 years of experience. And it's frustrating. If you don't let me, like how am I going to get that experience?

Ok I went to many places here trying to figure out what's the process. And most of them are telling me you have to study for six years more to get back your job, it's too much.

So probably the government can intervene in giving proper education or the skills they need to match the ones that the employment agencies need to fill out those vacancies.

It took me two years to get a professional job, and I value it, but I still haven't felt like I improved a lot from where I was in Mexico.

Participants often expressed a strong sense of belonging to the communities established at service agencies they go to. In other words, friendships were developed with other clients. This type of bonding mainly grew out of structured programs where clients attended over a period of time and had common goals. Respondents also talked about support from family, community, or through religious or spiritual practices.

Since I've started at [this program], I've met some family and friends. When I'm here, it's like I'm in heaven.

My oldest son, he's 16, he's my number one fan right now, like he's the one that backs me up the most besides the women here. He's like all the time "how many days are you clean now" and I go "oh I go by months now son". Thinking of him and my youngest son in my life, active again like all the time, is what keeps me from slipping.

I've been to sweat lodges, I've been to every church going and looked for God, and I always believed in God but I had a really violent family and some disasters ... I have a lot of support and Islam is not a religion, like people think of as a religion, it's a lifestyle, it's everything, it's from what everybody is talking about, your neighbours, they have rights on you, you have rights on your neighbours, but what it comes down to is what you believe in within yourself and being grateful, you know, to God or whatever God you believe in.

I was on the verge to cut school. So when my girls had their friends over, one of her friends were like "who's that?" And my oldest was like "That's my mom. She goes to school. She goes to college." It helped seeing my girls be so proud of me and actually have something to tell their friends and teachers.

I've been through a lot of counseling and therapy and the supports here at [agency]. It has been a great support to me.

It's amazing the program they had there. Meeting people, these people are really trying to stay sober.

I come all the way here on the bus all from the west side with four kids 10 and under, just to be with the people here.

Participants discussed the value of the help and kindness they received from support agencies, ranging from drop-in or warming centres to comprehensively structured programs. The support and learning from agencies was far reaching.

My life is better because of [this program]. We make friends, community, and jobs. We have good teachers that help us

Here in Canada networking is very helpful especially to newcomers. The first time that I attended a networking event I really didn't know it was called networking and I didn't know how to approach people...I learned how to really talk and build networks so the last time I went to the University of Alberta for the career celebration in research, I was able to approach the professors that I started to read when I came here and it was so fantastic.

You are never to old to learn something different especially about yourself, and when you open up to things I think that helps to. Like parenting programs any program that you can get into that makes you a better you is beneficial for your stability.

Others talked about the understanding and quality of support workers who have lived experience and who were examples of success.

Having lived experience is important. When I was first doing my intake, if I were to sit with someone who had never even walked a block in my shoes or know what it's like to have an addiction, I would have found it way harder to open up. But the first intake worker on the first day she spilled her beans that she had a heavy drug addiction and a heavy alcohol addiction and so that right away lifted the tension up and then my intake went amazing.

We all have the same health problems [HIV], we know what we go through, and we're not afraid to talk. We can compare. We know when we're having a bad day or a good day and there's staff here that really cares, really cares.

Change and Transitions

Individuals who rely on helping agencies commented on how discouraging it was when these agencies were closed. They also had difficulty when they had built a relationship with a support worker and then were shifted to another. When kinship and friendship communities were found with workers at agencies, the supports individuals received were often limited to that centre and its ability to provide services.

Weekends are tough! You know, this is open on Saturday, but Sunday, there's nothing to do

They connect us. I trust [agency], I've done the welfare thing, it's like pulling your hair out and you don't know what's happening because its different people.

The collaborators discussed the disparity between the length of a program and the length of need. Participants shared stories of how times of transition such as leaving a treatment program, getting out of jail, or becoming housed can be precarious to their progress. One may not have the skills, resources, or confidence to meet all the new challenges once they lose the structure and support of the program they left. Despite best efforts, one can lose some of the successes they have gained.

A group of mothers graduating from a rehabilitation program expressed their hope of being reunited with their children. One of the greatest barriers they faced was around housing. Getting adequate housing was a requirement to get their children back, and having their children with them was a requirement to get housing. This situation created a difficult cycle that was very hard to get out of.

Right now I'm nowhere near where I want to be even though I'm not homeless. I'm not on the street. I'm renting a bachelor. I have three daughters and possibly a son to come back to me in the future and housing, if I had the right place for them, I

know it would just happen that much sooner. And for me, to have my children with me is a huge motivator for life as well. Without them, I don't feel the same about my life. Well and it's trying to get back into that housing so I can have my children but I'm pushed to the bottom of the housing because I don't have them with me ...when I do get them, I'll only have them every other weekend. Well, that's not enough time for them to have their own bedroom according to these housing standards. So I would only be given a one bedroom.

Another participant discussed the barrier of not being able to afford the process of getting a pardon needed to pursue education and employment.

I've had barriers in the past because I could get back to school, I couldn't get into a program because I had a criminal record even though now I'm eligible for a pardon. It's kind of hard I don't have money to pay for that. It doesn't happen over-night either, it takes at least a year. And my record was from 20 years ago and yet I want to go to NorQuest and take the Social Work Program and then there's issues with the practicum and stuff. Even if I do get accepted, I might not necessarily be able to do the practicum or get a job

I've been turned away from jobs because of my criminal records and I would be like no, that was like 14 years ago and they were still like no, no, no. So it's just so disappointing.

Many people with a history of addiction found that there were many supports for individuals who were in active use, but fewer for those who were recovering.

It's so much easier, like I'm not even going to lie, when I was in active use, it was so easy for me to live. It was like I was getting more help because I was in active use of drugs.

This program runs for 6 weeks and we assume everyone will be better in 6 weeks, or that everyone will be settled within the 1 year.

It's easier to get help when your still in active addiction than when you are trying to get cleaned up because it feels like they look at it and they're like "oh, well she's clean now, she can do this on her own. Because they look at it, like she can go to work, she can do whatever, right? It's not a crisis.

I want to go back to school but I'm scared I won't have the same support. I'll just be tossed in a school. Like I know I want to take the program and everything but I might not relate with everyone and everything. Like I'll never have this [current program] again. And I want to have like a group that I could join.

Reciprocity/Participation

The survey data shows that 54% of participants volunteered within the previous 12 months with almost all (89%) of those who volunteered doing so with a community or social service agency. Statistics Canada's data on volunteerism shows that 60% of those who volunteer indicated that volunteering contributed to their interpersonal skills (Cancad).

Participants wanted to give back to their communities. This giving back could be as simple as checking in on others living on the street and sharing food or companionship. Giving back was not confined to those who had extra resources.

This is my community, and I've always wanted to make it better. I grew up here. But, as one person, I feel I can only help as much as others want.

It was very fulfilling in my life. Giving back to the community and being part of it.

Relationship with others and donation for poor people. Being able to contribute to poor people. In emergency situations, I can help people not just with money only. So that makes me happy.

There's going to be someone down the road who's going to need help or whatever and I want to be that person who can give.

Giving back also meant using ones' own lived experience to help others.

We are going to be inspiring other women afterwards [Addictions program participant].

I would like to talk about HIV with my Band and others. We should tell people on reserve how to deal with HIV and get tested.

I have worked tooth and nail to get off the streets and now I am working to get my friends off the streets.

Participants recognized that volunteering and giving back to their community was beneficial to themselves as well as others.

Volunteer makes you feel like, more like you belong to the community, and it helps you... it will help the people too, you know like – I do the volunteering at the [organization] every Wednesday once in a month, and feel good about volunteering.

I just told them [people that participant is helping] this is who I am. I'm not trying to be better than you or anyone else, I'm just trying to be better than I was before. So it took a while, I didn't talk to a lot of people because they just weren't ready to see the change, and now that they know this is who I really am and this is what I'm about, about being resourceful and helping and giving back because I know what it was to be back there.

Institutional Barriers

The effects of institutional barriers on ones' ability to build a better life were significant. For example, the rent for individuals living in subsidized housing is typically increased whenever their income increases, making it difficult to make progressive changes in other areas of life. Individuals in supportive housing also had restrictions around their living arrangements that made life lonely. Moreover, some of the rental regulations limited the number of visitors allowed and the duration of a visit.

I think some of the restrictions they put on like no roommates and like you don't have specific type, they have to change that as they got along because they realized that people on the street or people that are using or whatever in their past, tend to want community and tend to want to socialize.

I was just thinking when I was being placed I was given a doctor's letter to give [Agency] information. I'm severly handicapped because I am schizophrenic and I needed a year to recuperate, let the medication kick in. It doesn't just take three weeks, you gotta keep on at it. And I got moved into a stressful area, it wasn't the area it was the building. I lived right underneath the landlord. The place was paper

thin. After day two he told me I was being a little bit loud. Everyone knows their first day, this is my first home in 8 years, so I was excited already so I had a couple of friends over talking. We weren't drinking just talking, smoking some ganja anyways the landlord opened the door, just bangs on the door the next morning yelling, "so this is why you're homeless, I'm gonna send you into the darkness where you belong. He said that to me".

There's a lot of people that help me, but they all say I have to live alone... they don't seem to understand.

Although the housing program they implemented for Edmonton was a great theory; and for some it worked. Some of the restrictions they put on like no roommates, they had to change that as they gone along because they realize that people on the street or people who have had using histories tend to want community.

Participants were aware of many sources of help, but talked about their preference for consistent face-to-face contact.

With [government agency] for instance. They have lots of handbooks and stuff like [call centre]. Go there, browse, access free internet.

I think that having a 24/7 place to physically go to would be better than a telephone (number to call).

I have no idea where to go for help. And the [call centre] thing didn't help at all, they gave me all the numbers, all this information, and then you call them and you hit another no, and another wall, and another wall, and you tend to give up really easy when you're told, no no no on every hand you reach out.

Finally, one participant explained his frustration with accessing help, telling a complex story that matched his equally complex and disjointed journey for help.

When you call for help and you call [a call centre] and then you don't get the service that you're looking for they'll tell you like the length of the waiting call or you'll get a response from our mental health or any help – anybody that works for or with doctors or something, you have to wait like 2-3 hours. And then if you call the police non-emergency – when you call the police non-emergency they put you back and tell you like that's not our department, so you don't really get the help you need, because what's the point when it's a crisis to call [a call centre], you're supposed to get that service, but you would get like – you're like a baseball, they throw you to second base, to third base, you still don't know. By the time you get response, people who need it badly, they are dead before you get the response.

Respondents discussed their relationships with police when they were homeless. Some felt that the police could help them avoid incarceration by providing information and support. It is important to recognize that the core issue is housing and support, however, it is the police that must deal with people sleeping rough¹².

You end up putting yourself in dangerous riskful situtations just for that warm place to sleep for the night because of false information, and then you end up getting arrested because you were sleeping outside in the wrong place or so here you go,

¹² To sleep outside with nothing to protect you from the weather, because you have no home to live in. From the Longman Dictionary of Contemporary English

you got these police that instead of giving you the information that you need, they throw you in jail. So it's all a negative, more barrier, more barrier, which breaks your spirit down even more instead of helping build yourself up when you're already vunerable reaching out. It's already bad.

We get thrown in jail because we are in a public park. Cause I wanted to have a place at night to sleep. We need more access to the park. Cops will take a baton and throw you in the back of a car and stuff.

A participant with incarceration experience talked about his barriers to doing his time and having a rehabilitative environment in prison.

There is so much animosity between native people and white people and people who work in corrections, people who work in law enforcement. There's so much animosity there. How is one supposed to go into his time, get out and have a different perspective about white people who have incarcerated us?

Discrimination

The majority (6 in 10) participants reported experiencing discrimination. Proportions increased to 8 in 10 for Indigenous respondents. Discrimination was widespread with regard to location, making it difficult for individuals to gain access to services, procure housing, attend school, and generally live in their community.

Some participants coped with discrimination by trying to rationalize it and forgive their perpetrators.

The reason why I try not to take it personal because sometimes they do it, they don't even know they're doing it, it's not their fault. I'm really not blaming them, they just grew up with it so a majority of the discrimination I experienced, it's unknown to them.

So even if I go in a store. The first thing you do is feel the eye drawn on you so I get what I need and walk out the door. At first, I was like I can't go back to that store, but then I realized, I can't let it get to me every time right. And there is always going to be a reason why someone is following you around. You can either confront it, ignore it and just keep moving on.

For immigrants discrimination was often based on stereotypes and the belief that immigrants were not trying to fit into Canadian culture. One mother shared her pain in seeing her young daughter experience taunting at school.

I will have a better life, the first thing – first for us as immigrants is to feel welcome to this country. Like for example, my child two days ago she came back from the school, she was crying. And then I ask, how was school? She told me no, the students were laughing about my hair, you know? So I said – why, what happened to you, your hair? "They say I have ugly hair, I don't have straight hair like them". And so from that, I feel like – even if I say I want to have a better life, it won't work when someone is saying bad things. So I say I am not welcomed, yet.

Another respondent shared her experience of discrimination when trying to procure housing and employment.

I used to live in outside the city, most of the people they say, "oh those black people are eating our money, they are just having babies and sitting at home, they are just

eating our money, we have to stop them getting the home". We are strong, even if we are from Africa, we are strong, we can work, but no body give us a job maybe because we don't have high degree, or we are not white as you guys, but we can work anything. Having babies, it's not the big issue that we can't work. So the thing I can say, it's just good to teach maybe everyone, because I think most Canadians they don't take us as people, they take us as animals.

Another immigrant talked about discrimination that came from her own culture as she worked to integrate in Canada. This same phenomenon was also experienced by Indigenous participants who had moved off a reservation in pursuit of a better life.

When you like something else, they say "oh, you've become too westernized, you're forgetting your roots." And you're thinking "I've always thought and felt this way, people would not like this at home. It's only that now, in this environment, I'm more free. I can tell you to your face.

And if you move away from the reservation you get labelled as an apple.¹³ In my community I don't feel like I belong.

Immigrants and Indigenous participants shared experiences of discrimination. Immigrants stated their confusion regarding discrimination against Indigenous people.

I work with different kinds of people, and the way they would refer to Indigenous persons was really shocking. I'm an immigrant, how do you think that's supposed to feel? When you say these things, think about an Indigenous person. I see even in their interactions, they're more accepting of me, who looks different, sounds different, from a different country, than an Indigenous person. So that was one of the things that really shocked me and is still confusing to this day. How can you love me, an immigrant, a foreigner? I can wake up tomorrow, pack up my bags and leave Canada – and you cannot turn to your brother, your sister who is here – how does that work?

Another immigrant, who was studying to become a social worker discussed how the culture of discrimination was perpetuated and how her education gave her understanding about discrimination and the history of Indigenous Peoples.

For me, like coming to Canada, I started working and then the first thing my coworkers would tell me whenever we got an Indigenous customer, they'd be like "oh, yeah, they're taking money from the government" or "that's all they do, they don't work." Like the stigma and the stereotypes just adds to me – coming to Canada, I didn't know what an Indigenous person was or what they looked like. But the immigrants that have been here longer, they easily recognize what an Indigenous person looks like, and then they will automatically think, since they're not in the Social Work program, they don't learn what they've been through, so whatever they learned from the same culture or what people told them, that's what they're going to believe until no one tells them the actual truth. And that's sad because I took the citizenship test recently, like a year ago, and the booklet doesn't even explain the whole history I'm like, if I'm going to be a citizen here, I'm going to know what really happened.

¹³ Indigenous people often refer to someone who has left the community as an apple; white on the inside and red on the outside.

Differentially experienced discrimination was also discussed by Indigenous respondents, who shared similar perspectives with the aforementioned responses from immigrants.

Do you know what it's like to be marginalized and to have people from other countries come in and be racist against you and you are a First Person and this is your country? It happens to me on a daily basis. It happens to a lot of my people on a daily basis. You know, like, you guys...people will come to Canada and they won't really understand what racism is and then they will get socially defined into these groups, and then all of a sudden these groups think, OK well, this is who we are, and we are only going to associate with these people, and oh, those are the Indigenous people...we don't want to be like them. We want to be like everyone else, so we're going to knock those indigenous people. And that's in my own country.

Indigenous respondents reported experiencing discrimination frequently and pervasively.

Even if you try to ask for financial help and you go to [government agency] and ask about financial help, it's like they act like it comes out of their pockets and they look at you like, you shouldn't be here.

I like being able to take a cab, without having to worry. I hate taking cabs. I live on 118 and have had cab drivers actually proposition me. Like "are you one of those girls"? I like being able to go to a shopping mall without having to worry, I like going on a bus without having to worry, I like being able to go to a food court without having to worry. Specially going on a bus. Buses are the worst. And then the bus drivers make you feel like crap, people make you feel like crap, like 'oh you have kids'. Anywhere, if you have kids and you're native and you're a women, you're just nothing.

Because I would have to say there are just as many natives in cities as there are on reserves. The people on the reserves, they get new houses and this and that. What do you get in city? We get to sleep in the Bissel.

You walk down the street and there are assumptions that you are like an addict, alcohol or, drugs or, you're a homeless person.

Another Indigenous respondent talked about seeing an automobile accident and then being overlooked as a witness.

I once saw an accident. This older couple was crossing the street. They got bumped. *I* was right there. *I* was the first person to see, plus the people that were driving. The cops arrived. They said they wanted to speak to the people that had seen the crash. *I* was the first one to see it. They let me go. *I* thought "Oh, they let the Indian go 'cause *I* might lie and discredit the scene here". So *I* left.

Other Indigenous participants discussed the entrenched discrimination that comes from the Canadian history of abuse and inequality to Indigenous Peoples.

We now have policies based on the values of western societies for what it means to have relationships in family. When we don't meet those relationships, our children are scooped.

Being born into a society that you never really were a part of anyways. That can have a big effect on especially First Nations People because we come from a different society. And the thing is that I always thinks some people are just born into the *illusion of thinking that they are free. As native people, we always knew that we were free. Just people always told us that we weren't.*

The legacy of residential schools that are still in effect, drug and alcohol abuse, people are still stuck in that rut. When you live on a reserve that's closed off from everybody, you don't remember that there's a world out there that you can get these things. When you are in the reserve and surrounded by people who are hurt, who are affected by residential schooling or you know, the ripple effect of it, you don't know how to evolve. You don't know to grow.

Hope, Compassion, and Resilience

Despite numerous challenges, many of the participants showed character, spirit and ingenuity when dealing with everyday difficulties. Many valued and demonstrated the qualities of hope, compassion and resilience.

But now that I want to live – before I didn't want to live – but now I want to live, I am stable enough, yeah – I've got a home, I got hope, I got a dog.... I have to plan that – I have to do it for me, no one's going to do it for me. I always say that we have to restore those belief systems from our ancestors, we call it like cope to win. It's like that but it's a spiral that goes up and it consists of everything, our community, our people, our creator, all of that stuff. Having those values restored within our children, it's hope to the future because our ancestors always looked ahead seven generations for the future of our children. My kokum and my mosom taught me these things.

I smudge every day. *I* pray for my friends and other people who cause me harm.

Thank you God today I'm here. I really, really appreciate Canada and the government. All of the people who are around me, who saved me with my kids. To bring me and to feed me here since I come here, who's watching me like, inside their heart, and always watching me and my kids.

The only way I feel welcome is when it comes to the instructors and people is because they show me their vulnerability. They show me they are human as well and that they know where I'm coming from and want to see me succeed. And that's where I feel accepted when they want to see me succeed and that makes me want to try harder. And I have a goal in life and hopefully I get a career and get my kids out of there.

Inside the church you feel comfortable and you feel you forgot your other problems behind you. You forget the bad things which are troubling you, and you share with your friends all day.

I think people who belong in the community, they are always happier than others because they get help from the community a lot.

For the majority of participants, community did not necessarily refer to the people in their immediate neighborhood. Community was often defined as a group of friends, people with shared interests, people who were enrolled in the same program at an agency, or people from the same ethnic or religious community.

Look at where you can participate or chat with someone during the day. It can get quite lonely otherwise. It's so easy to just stay in the house, then you'd never go anywhere or do that interaction. When participants faced difficulty navigating a process or finding help, they often found their own ways (work-arounds) to meet their needs, demonstrating resilience and connection. A group of Indigenous participants shared their experiences with using an alternative way to find someone they were looking for.

I feel my community is Churchill Square. That's where I will go if I want to meet up, hook up with First Nations people. Any time, somebody phones me saying "This person is missing, we haven't seen them. Can you please find them?" Sure, I will go downtown and I will go find them and sure enough, what "Moccasin Telegraph" does its duty to tell anybody that knows this person where families wanting to hook up with them are. So you don't need to go to the cops. You don't need to go to the social agencies. If you are a native, you just go to the Churchill Square, you ask the people that are First Nations, they will hook you up.

When a group of immigrant women determined that they needed help not offered by their supporting agency they formed their own group. This group of women helped each other with things such as child care, transportation, lending interview clothing, sharing job postings, and supporting each other. The result was an empowerment that helped them to be resilient and successful.

In this group, we were in victorious. It's a multicultural group where we have Filipinos, Columbians, we have Indians, we have Moroccans. What we had to do to get all of us in one group is we created a group on "WhatsApp" which is the social networking over the phone. We have group chat everyday as to what we are doing, the opportunities we come across.

Case Studies

Three case studies took the form of visual life maps presentations. Please see the Methodology chapter for background and development of the case study process. The life maps included at the end of this document in the printed format are meant to provide an overview and can be accessed in digital format for printing from the Better Life webpage www.norquest.ca/better-life.

Collaborator Focus Group

Community agencies were part of this project from beginning to end. Their high level of participation and the process of building the project is discussed more fully in the Methodology chapter. While the number of agencies and their representatives fluctuated over time, the number of those involved in the project ranged from 25 to 40. The collective knowledge of the project collaborators was instrumental to the success of the project. The following section shares their wisdom, advice, and explanation of what does and does not work well in the community.

How do you build Social Capital with staff and clients?

Collaborators discussed how their organizations built Social Capital with their teams and clients. They talked about building lasting relationships over time, with some of the organizations having served the community for more than 100 years. Many of the agencies are a strong part of the history of the community as reliable and trustworthy entities.

We have tried to portray ourselves positively in the community and build networks, I think that has built a Social Capital for the organization that we are then able to transfer on to the people we work with to build positive relationships. In my department specifically, we go out into the world and try to build relationships, with

landlords and social income resources and we try to leverage those relationships to help folks get to a point where they are able to live independently.

[Agency] has a rich history of fostering relationships with other agencies. We also have a rich history in community engagement, and with lots and lots of free community engagement programs for families and children.

Another collaborator talked about working in an environment where there were no physical barriers to access.

No barriers so there was no distinction, people wanted to have a conversation, they had a conversation with you. And often it was, you connected a little bit with people as a result – when they had to let off some steam for whatever reason, they could just come into your door or somebody else's door and just talk, and I think that the less barriers, physical barriers that we have in the agencies that we are operating in, the easier it is for communities members to build Social Capital. Of course everybody has programs, and they collaborate with others, those are all good things, but at the end of the day it really amounts to a one-on-one conversation.

That open door policy, sometimes it's a person just walking in with a cup of coffee if it's cold, or a glass of water if it's hot, fostering those relationships from there. We try and break down basic barriers like for all of our programs we try to have a hot meal, we provide childcare for our programs which is huge for parents, sometimes it's just getting a break from their kids for an hour.

An agency staff described how her organization built morale and community to help people build their Social Capital.

One of the things we do as the [community agency] staff, we celebrate each other. We do something called Crush It, where if somebody does something exceptional, we all get all our little shot glasses and put Crush pop in it, and crush it back. And we have a crush it wall, where we put our names up on it. I just think it helps to build morale, to see that we care for each other, and in terms of our community, celebration is also really key.

Collective Kitchen has been the longest most consistent, well-attended, and an amazing experience for building Social Capital. They are not only teaching people to cook, they are talking, having conversations about what they want to cook, about what the group wants to cook... and also with the meals, and the cook is taking the meals to them. Clients don't line up. It's a smaller drop in, so we can do that. We don't have to have people line up for meals – we can take them to them. It gives them a different level of feeling respected and feeling welcome.

We help the newcomers and Canadians with low income to secure employment in Canada, but we build Social Capital by being flexible around our rules. Because sometimes our clients do not only need employment, they need emotional support. They need housing, they need – basically they need a friend.

If they [clients] are looking at things they could possibly give back, and make themselves feel more like they are part of the community through the processes which is awesome. But we also help them when we look at the seven sacred teachings, and say – out of these seven, what do you think you can give today? And so it just provides a little bit of a framework where they can say yeah I do have something I can give to courage, I can encourage somebody today. And so I think those - some of those little simple steps, they start to feel like "hey, I actually have some Social Capital, I have some jingle in my pockets that I can give away today".

Finally, a collaborator who worked with the City of Edmonton talked about how the city builds Social Capital.

I think we build Social Capital by making as many of the city resources and programs and services as broadly accessible and inclusive as possible. I think by increasing access to transportation with the free passes and the low-cost passes and recreation I think those things go a long way in allowing people to connect in places in the community, and having an opportunity to connect with people they may not otherwise connect with. So I think a lot of our work is about bringing people together and organizations together in communities, and in public spaces.

The group pointed out the advantages of hiring workers with lived experience, noting that this practice also means providing support and professional development suited to these workers.

There is a divide between staff and community, but it's true that if you've been through the process [have lived experience], it lessens that gap.

I was also a part of the community on my own for 25 years before I decided to quit using. For me, I think that by being open and honest with the community, I share my story that I'm no better than you, I was where you are, and that opens huge doors with the community.

They [employees with lived experience] often aren't the most well paid, and sometimes are even struggling with the same things as our community, and that can be a good thing for empathy, but it can also be not a good thing if people are just there for a job, or just couldn't get anything else, or also institutionally, your staff and your community is that divide that's there. It's always a tough balance for us to bridge the two, so that we can have healthy Social Capital building, healthy belonging and healthy relationships being built.

Workers as advocates - our experiences as front line workers, we come to understand language. And things that people are looking for when you're talking to landlords, and people who essentially are the gatekeepers for social linkup. There are buzz words, and there are certain topics that are important to be touched on, and I think that through the decade of this program existing, we've really come to understand how to advocate for someone using the right language – talking to an [government agency] worker using things like crisis, or knowing that you really need to emphasize that there are children involved, things like that.

One collaborator talked about a program developed to support Indigenous Elders in their work in the community.

We try to build a safe place for Elders to be themselves, to feel listened to and to be appreciated as well, to alleviate that social isolation that they may be going through, and also to... to help them understand and know what's out there in the community for them we also can get them connected to cultural teachings, ceremonies, and we also provide elder support through [Agency] and with our cultural team.

How would you like to see the research shared in the community?

In this section, collaborators shared their ideas for final project products.

- A written report with visual data presentations
- Breakdowns of data for each subgroup: Indigenous, Immigrant, CBNI, PSU, Problematic Substance Use, Ever Homeless, and Poor Health
- Frequencies and descriptives for each subgroup
- A visual presentation of the methodology and case studies
- Accessible findings shared in the community
- Periodic reports to the community
- A visual summary of findings that is user-friendly with participants (project booklet)
- Publications and articles that are easily accessiable

A collaborator discussed why the findings are important.

All of your findings and all the data are very important for the agencies to know in full detail, because I feel what that does is help us to be informed. It helps us to learn to know what to focus on. It helps us to be very reflective in our practices when we are dealing with people, and to think beyond what their immediate crisis may be, and to think about the impacts that isolation has.

Another suggestion from a collaborator was to find a way to connect with respondents partway through the project to keep them engaged and help them to feel confident that the findings will be shared with them. This request was borne out of the multiple requests from participants, wanting to know about the findings.

Midway through the project the researchers created a card to thank participants and share some preliminary findings from the research. These cards were given to collaborating agencies for distribution to participants.

Within this project the focus was to measure components of Social Capital. It was not until the analysis phase, when strong correlations between the measures were found, that the creation of indices of the six themes of Social Capital was possible. Finally strong correlations of the six indices allowed for one index for a single measure of Social Capital. This measure can be further tested and used to inform Social Capital measures in other contexts. One collaborator spoke of the importance of a quantitative measure for Social Capital.

I think organizationally, at least a bit for me, metrics and measurement of Social Capital are notoriously difficult, in terms of having a universal standard. It would be really nice to develop [a measure] from this research. We can adopt, even amongst the collaborators, some standardized metrics, some standardized tools that would allow us to, you know, a year or two from now, discuss how we see Social Capital as emerging. It's not an emerging tool, it's been around forever, but we are now describing it in a way that is may be codified, or may be universally understood. I think there's a real opportunity that we could create some sort of standardized way of measuring it, quantifying it so that we can have that conversation in the future. Because right now, it's well and good to identify activities that develop or help support Social Capital or give us the currency of Social Capital, or however you want to describe it or your approach might be, but it would be really nice to be able to measure it.

4. Indigenous Subgroup

This chapter compares Indigenous with non-Indigenous participants. Please read the other chapters in this report to understand methodology and the general findings, explanations and references.

While analysis was conducted including the complete set of variables, this chapter presents only the statistically significant differences between Indigenous and non-Indigenous participants. Differences considered to be significant are those where there is a 95% or more surety that differences found are not due to chance.

Likert Scale measures used in this survey included:

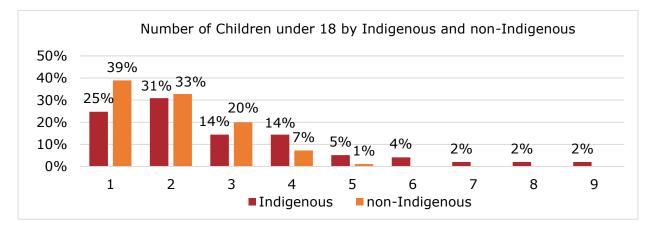
- *Rarely or never, several times a year, monthly, 2-3 times a week*, and *daily* (five measures)
- *Never, sometimes, most of the time,* and *always* (four measures)

Quotes are provided with as little editing as possible to allow the voices of the participants to come through.

Demographics

Indigenous participants accounted for 35% (n=213) of all respondents. The average age of Indigenous participants was 42 years. Sixty-two percent (62%) of participants were female, with the remaining 38% being male, and one participant reported being transgender. Fifteen percent (15%) were in attached relationships (married or cohabiting) compared with 45% of their non-Indigenous counterparts.

At 53% there were no significant differences between groups as to whether they had children under the age of 18. Indigenous participants who had children, were likely to have more children with a mean of 2.44 compared with 2.29 for non-Indigenous.



Children of Indigenous parents were more likely to be in foster care at 13% compared with 2% for non-Indigenous. There were no significant differences between groups regarding the proportion of children living with ex-spouses or partners, grandparents, or other relatives.

Residence and Housing Stability

Participants were asked how long they lived in Edmonton and how often they moved within the past 12 months. The range was from less than 1 year to 63 years with an average of 20 years for Indigenous, compared with 15 years for non-Indigenous participants. Seventy percent (70%) of all respondents moved within the past twelve months (anywhere from 1 to 25 times), and Indigenous respondents moved more frequently than their non-Indigenous counterparts (2.2 times vs. 1.6 times).

Many Indigenous respondents found themselves frequently moving residences between reservations, settlements, or rural communities and Edmonton. Those who moved to Edmonton often did so to build a better life by pursuing education. One participant explained:

I'm not trying to be better than you or anyone else, I'm just trying to be better than I was before.

Being in Edmonton often meant a lack of supports especially when there were needs regarding childcare. One respondent discussed how community is important to single parents.

If the village doesn't exist then neither does the support system. Being single parent women, the village helped them out. Because that model doesn't exist anymore, parents are being susceptive to harder times.

Income

The median household income for Indigenous respondents was 25% lower than for non-Indigenous respondents (15k for Indigenous vs. 20K for non-Indigenous respondents).

Given the very low household incomes, it was common for respondents to feel that their lives had improved greatly with modest increases in support.

I'm on AISH [government income support for the disabled] and I felt like a millionaire when it went up. I can afford to live right. I mean to pay the rent and just your normal stuff.

Another respondent who had known a better life, prior to living in poverty, described its' far-reaching effects. Her experience of having lived both in financial comfort and in poverty gave her deep perspective on the spin-off effects of struggling to attain basic needs.

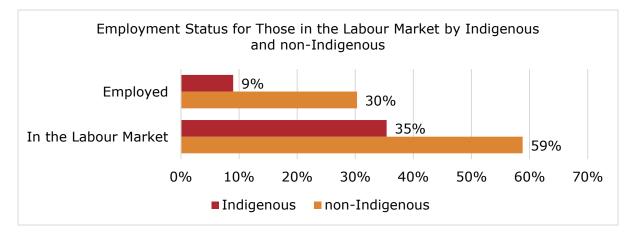
I've lived actually two different lives and I'm grateful that I got to live the first life and to know what it feels like to live out of poverty. Now I've lived in poverty for so many years and you are able to weigh what options are attainable and which are not. I never wanted to admit that or see that before. You loved working and you loved being out and about. Even money has a way of affecting your personality, your outgoing spirit... money has a huge part in how you feel about yourself.

Finally, one respondent offered their perspective about working.

If you pay someone to do nothing, they will do nothing. If you pay someone to do something, they will do something.

Employment

If participants were not working but were actively seeking employment they were counted as being in the labour market. Indigenous participants were less likely to be in the labour market at 35% versus non-Indigenous participants at 59%. Indigenous participants were less likely to be employed at 9% versus 30% for their non-Indigenous counterparts. For the employed, the average number of hours worked per week was 17 hours with 8 in 9 participants working mainly part-time or casual jobs.

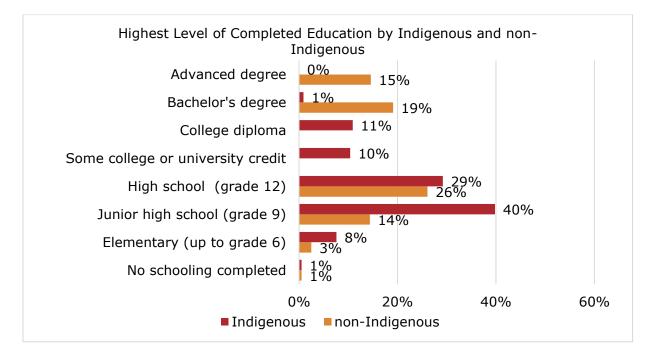


The frustration of not having connections that lead to employment (bridging Social Capital) were evidenced by one respondent when he stated:

Not connected to the business community, not connected to the government community, not connected to the nation, not connected to the rest of the world.

Education

Indigenous participants were less likely to be attending school at 27% vs. 39% for non-Indigenous participants. Slightly more than half (52%) of the Indigenous participants had completed high school or post-secondary education compared with 82% for their non-Indigenous counterparts, and half were planning to pursue further education. For those not planning further education, the most prominent reasons given were poor health or disability and feeling too old to attend school.



Indigenous respondents talked about barriers to education, and how those barriers existed from childhood.

When I was in grade school, I went to a Roman Catholic School where there were two classrooms, one for white kids and one for native kids in northern Alberta. We knew we did not belong in the other class.

Barriers to post-secondary education included not being well informed about programing or programs that ladder into further education. Additionally, non-refundable application fees and deposits were defined as barriers. While barriers to education exist, many still see education as the way to build a better life. Mature students talked about how being role models to others helped them gain self-worth.

My girls had their friends over, one of the friends were like "who's that?" My oldest was like, "that's my mom. She goes to school. She goes to college". And when I heard her mentioning that, I was like, wow. And also, I had a couple of conversations with my brothers who asked what I was doing and if I just stay home. I said, "I go to college." And they said, "Really? Keep it up!" And it kind of helped seeing my girls be so proud of me and actually have something to tell their friends and teachers. It made me feel good like I was making a difference in their life.

Now I'm back into school and son of a gun I only went to grade eight and a little bit of grade 10. I've found that I've got qualities I can use to further my education. And my daughter, you know she was seven credits away from graduating. This was one of the reasons I came back to school, to push her to graduate.

So I decided to come to school and put my needs first and my family and to get a better career.

The role of colleges is paramount to the success of people moving out of marginalization. Students often begin at a level commensurate with their prior education and ability, but may be returning to school after some time has elapsed. Success often depends on attending smaller classes where staff are able to spend time with students to help them feel comfortable and accepted. An example of the provision of services specific to the needs of Indigenous students is NorQuest College where Indigenous specific services that integrate Indigenous ways of learning are offered in the classroom. Furthermore, Indigenous counselors and Elders are on-site to support students.

Students reported receiving support that went beyond academia, support that grounded them, gave them a sense of belonging, and helped them in their journey to a better life. The following quotes come from interviews and focus groups with Indigenous NorQuest students in upgrading programs.

When my mom passed I just wanted to quit. I had the support from instructors. I love being here. I feel most comfortable and get the most encouragement and it also gives me strength just to get through my day.

In my community I don't feel like I belong. Everybody is closed off, everybody is still hurt. They're not healing, so we can't really engage with that because they are not taking care of themselves. But when I come here [NorQuest College] I feel like I belong. I make a lot of friends, they make me feel welcome. They engage with my interests and we talk, we communicate. That's where I feel welcome.

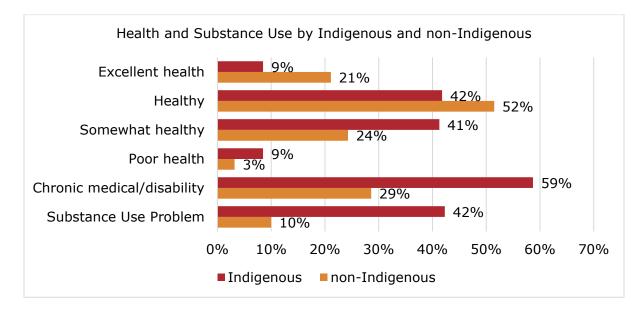
First Language

One quarter of Indigenous participants' first languages were Indigenous languages with 68% of that group still being able to speak that first language. This proportion of language retention and ability indicates cultural retention and pride. The variety of first-languages indicates the diversity of nations included in the study.

Indigenous Participant's First Language					
Language	Number	Language	Number		
Cree	36	Mikmaq	1		
Dene	2	Nakoda	1		
Saulteaux	2	North Slavey	1		
Soto	2	Ojibway	1		
Beaver	1	Sioux	1		
Lakota	1	Slavey	1		

Health and Problematic Substance Use

Overall, half of Indigenous respondents rated their health as either *poor* or *somewhat healthy*, and a majority (59%) reported having chronic medical issues or a disability. For Indigenous respondents significant negative influences on health included age (the older one was, the poorer their health) and trust for agencies (the lower one's trust, the poorer their health). For non-Indigenous respondents loneliness had a significant negative influence on health, while education had a positive influence. At 42%, the proportion of Indigenous respondents having problems with substance use in the past twelve months was more than four times that of non-Indigenous respondents (10%).



Respondents reported using substances to cope with the difficulties in their lives, such as being homeless, or having to work in the sex trade in order to survive and maintain housing. Substance use was also described as a way to feel normal in an abnormal environment.

Respondents discussed the difficulty of leaving substance use, returning to substance use, and the constant and daily battle not to use. They were very thankful to the agencies that supported them in this journey.

It's the harm reduction method instead of abstinence. It works to help people that realize they need change but don't necessarily know how to go about it. Here you go at your pace. If you try and you fail, you're still welcome here. Wherever you are, they encourage and support.

So I slowly tried quitting drugs on my own. Then I started hanging out with my uncle. He's a community worker and he started hiring me for jobs and stuff and I realized I wanted to do more after being sober. I just figured I'd go to school and do something with myself while my kids are in school. Basically it's been a lot of help to me. Helped me get my learner's, a vehicle, put me on the right path to recovery, to do something with myself.

Another respondent talked about the sobering-up process.

I guess for me it was the sobering up part. Because I've been battling it for years and years, and I guess it was a coping thing. First my son passes away, and then my sister's husband passed away, and then I saw that I am killing myself slowly, and they all want me to stop. It is just a big struggle, and just one day at a time I guess.

A respondent with chronic illness talked about the support received at a local agency.

We all have the same health problems. We know what we go through, and we're not afraid to talk. We can compare, we know when we're having a bad day or a good day, and there's staff here that really care, really care.

Residential School & Rebuilding Lives

Indigenous respondents discussed the effects of residential schools and the subsequent Sixty's Scoop. Even though many respondents did not experience these events personally, they talked about the vicarious traumatization that affected their lives.

Residential schools are still an effect, drug and alcohol abuse, people are still stuck in that rut. When you live on a reserve that's closed off from everybody, you don't remember that there's a world out there.

It goes back to how you were raised. A lot of these issues, it's probably going to go back to the residential era, that's where it all begins. For us on the reserve here it goes back to getting x amount of dollars when you are 18 years old. Last thing you want to do is go to fricking school. I had \$38,000 when I turned 18, half of that went up my nose. I'm being honest. The other half was drinking. And so when you couple that with your parents being in residential school and having those issues, and growing up with those issues. I mean what knocks you down only gives you that much desire to get the hell off your ass.

We now have policies based on the values of western societies for what it means to have relationships in family and when we don't meet those relationships our children are scooped.

You need to understand that it's still being done. The residential schools took, they say, 150,000 children were put in the residential school and we know the damage of it. Are you aware that there are 350,000 Indigenous children in care right now? What's the damage going to be in future generations and that's based on policies. That's all I'm saying. So there are barriers.

Another respondent recounted her experience of struggling to improve the lives of her children and herself, and her work on transcending barriers to build a better life. It is important to note the complexity of living with multiple challenges.

My barriers are, there's things that I go through at home that I don't go through here [off reserve]. The things that I go through when I'm at home... well, last summer, there were 19 teenage boys who were in a gang and they smashed my whole house for the gang initiation and the next initiation they spray painted my whole house. And because I kept calling the RCMP and charging them and going to court and stuff, I've become a target in my neighbourhood. I'm the rat who always calls the RCMP all the time. It's because I have two toddlers who I'm taking care of. It was really tough to see them scared and it's really hard to see as a mother. And it's in my community. And I want to be part of my community but everyone's hurt. There's a lot of issues going on there. And there's not a lot of resources and if there are, it's only limited to a small group all the time. For example, there was a residential school program where people can go and talk about it and get support, but it was limited to 25 people. So there's things like that, barriers like that. It's hard to go on sometimes. I'm worried about my home, worried about my kids while I'm at school, are they going to be okay? Is anything going to happen? I worry about that too. And on social assistance days, everyone's drinking and walking around, and there's cops and RCMP flying all over the place. People dying on my road in my same neighborhood. Just a couple months ago, he was my neighbour, he has three children and he was stabbed in the arm two times and he died instantly. It was two driveways from my house. So its things like that. You come from somewhere like that and then you come here [school] and it's so welcoming. And the only way I feel welcome when it comes to the instructors and people is because they show me their vulnerability. They show me they are human as well and that they know where I'm

coming from and want to see me succeed. And that's where I feel accepted when they want to see me succeed and that makes me want to try harder. And I have a goal in life and hopefully I get a career and get my kids out of there and become a nurse so they can live in a nice environment. But at the same time, I'm taking them away from their culture that is beautiful. I smudge every day, I pray for my friends and other people who cause me harm.

Homelessness and Housing

Seven in ten Indigenous respondents reported being homeless at some time in their life compared with 1 in 3 non-Indigenous respondents. At the time of interview 75% of all participants had permanent housing. The average time homeless in the past five years was 2.52 years. One third (33%) were homeless four or more times during the previous five year time period.

While discrimination is often a factor in procuring housing, poverty is a factor in sustaining housing. Indigenous respondents talked about coming to Edmonton to seek employment or education only to be forced to return to reservations when they could not sustain their housing.

Rules pertaining to the number of occupants per dwelling were seen as restrictive. Participants described the isolation that comes with living in a facility that puts restrictions on roommates. Some residency rules cite no visitors while others do not allow for long-term visitors.

Although the housing program they implemented for Edmonton was a great theory; and for some it worked. Some of the restrictions they put on like no roommates, they had to change that as they go along because they realize that people on the street or people who have had using histories tend to want community.

In cases where respondents were moving out of addictions and needed appropriate housing in terms of bedrooms to get their children back, the requirement for a specific number of bedrooms was a barrier. Rents were often unaffordable, but had to be maintained in order to reunite the family.

I'm in a two bedroom however I can't afford it. My rent is \$1000. I pay it though, it's hard. I don't want to give it up because my daughters want to come back this summer.

Volunteerism

Respondents clearly saw volunteerism as a way to give back to their communities with 45% of Indigenous participants and 60% of non-Indigenous participants having volunteered in the past 12 months. With the exception of Indigenous participants being more likely to volunteer at Indigenous serving agencies, there were no significant differences in the types of agencies where volunteering took place.

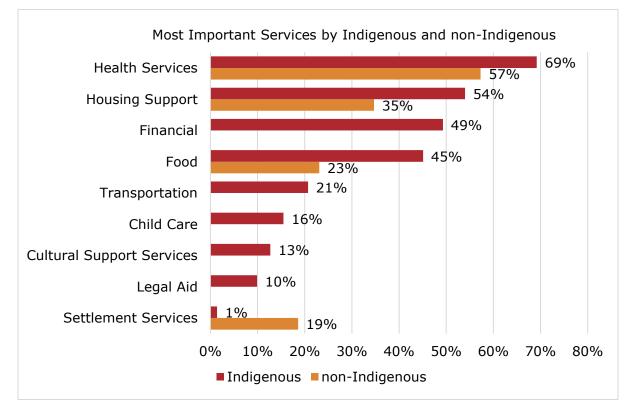
This is what I am about, being resourceful and helping and giving back. There is going to be someone down the road who's going to need help or whatever and I want to be that person who can give. You are capable of helping others even though it's hard sometimes to help yourself.

Voting

There were no significant differences in voter turnout by Indigenous and non-Indigenous respondents.

Most Important Services or Sources of Help

Participants were asked to think about the three most important sources of help they received from agencies or government, either in the past year or at the time they needed help. The highest proportion of respondents rated health services as most important, followed by housing and financial support.



While respondents were often drawn to feeding programs out of necessity, they talked about the benefit of services that went beyond basic needs. One participant at a family program talked about having meals together with her new community and the effects on her family.

When we're here we get to sit with each other. Because even at home at supper time we don't sit with each other, it's like oh dishes up, I'm going this way, this TV, we're going this way, one is sitting on the tablet. It's like we never sit together and the only time we come together to be "together-together" is like here, so it's actually great. Moving out of programming can be a vulnerable time. Those leaving addictions to lead a more independent life are sometimes afraid that the growth made in programs will erode, and that they will lose their focus on success as supports diminish. This fear was described by a respondent who struggled with maintaining sobriety.

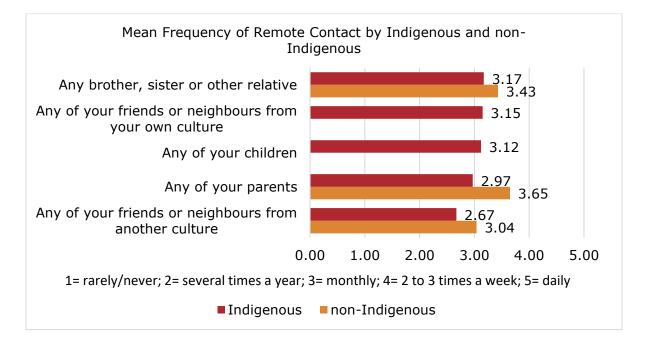
My current housing is kind of letting me loose, they think I should be living on my own. Even though it looks like my life is turning around. I have been sober for four years, I volunteer, I still don't think I can be out on my own. I feel like right now I love where I live, I'm stable. I'm scared my life might be turned upside down again.

Contact with Others

Respondents were asked about the frequency of their contact with others; both face-to-face contact and remote (via phone, skype, internet, etc.). Contact with others was measured on a scale of 1 to 5 where 1 means *rarely or never*, 2 means *several times a year*, 3 means *monthly*, 4 means *2-3 times a week*, and 5 means *daily*. Means for each measure are shown and the higher the mean, the more frequent the contact.

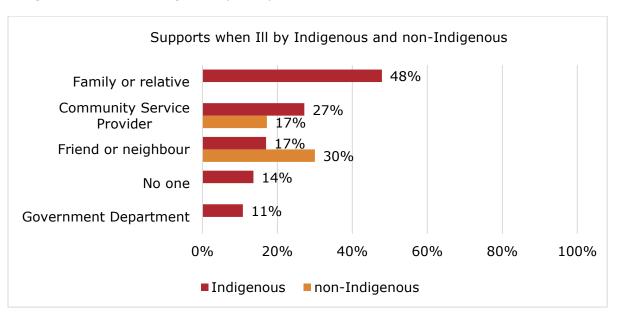


Some of the significant differences may be influenced by the immigrant respondents who had relatively high levels of contact with family in other countries using remote measures.

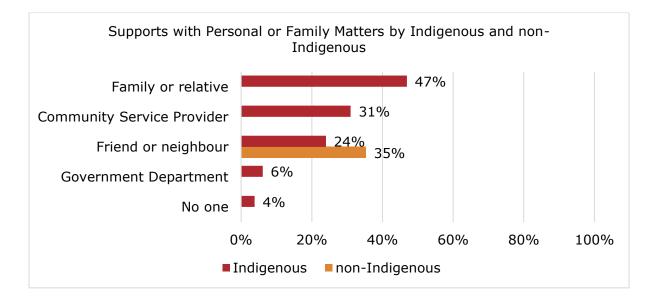


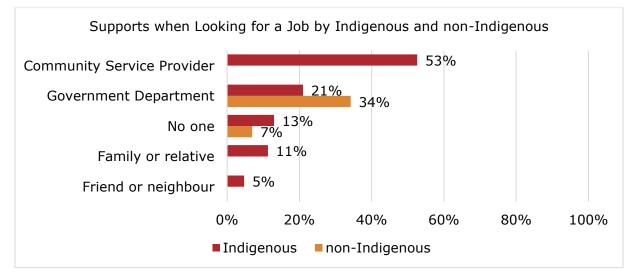
Support Systems

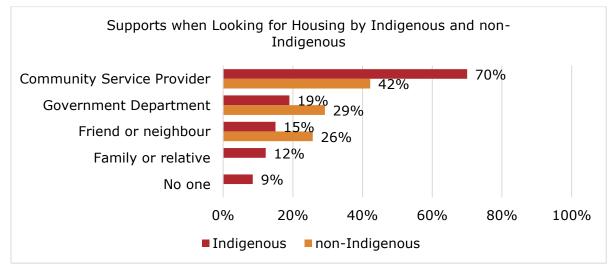
Participants were asked who they would call on if they needed support in a variety of situations such as looking for a job or dealing with a serious family matter. Each scenario is depicted below in a bar graph. Listed choices for sources of support were *family or relative*, *friend or neighbor*, *community service provider*, *government department*, or *no one*. Participants were asked to select all the sources that applied to them. A very small number of respondents indicated that they would turn to prayer or religious leaders. With the exception of supports when looking for housing, the most utilized supports were family or relatives.

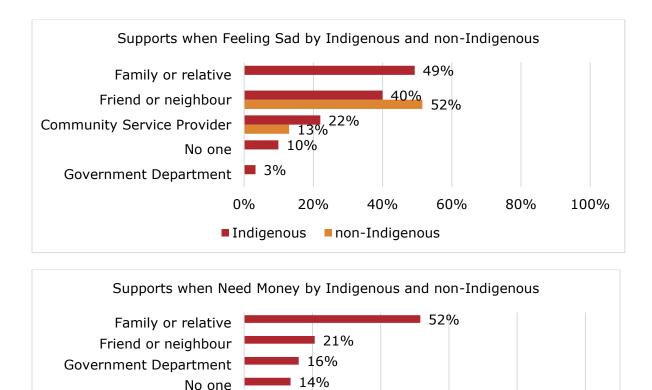


Note that non-Indigenous category data is shown only where significant differences between Indigenous and non-Indigenous participants occur.









With regard to accessing supports, respondents were most appreciative of face-to-face services and expressed their frustration with accessing services by phone and having to navigate a system of automated referrals. One respondent discussed the circuitous path to service while another indicated the need to have a physical place to go to.

40%

60%

80%

100%

3%

20%

Indigenous on non-Indigenous

Community Service Provider

When you call for help and you call [call centre] and then you don't get the service that you're looking for they'll tell you like the length of the waiting call or "you'll get a response from our mental health or any help." Anybody that work for or with doctors or something, you have to wait like 2-3 hours. When you call the police nonemergency they put you back and tell you like that's not our department, so you don't really get the help you need, because what's the point when it's a crisis to call [call centre]. You're supposed to get that service, but you would get like – you're like a baseball, they throw you to second base, to third base, you still don't know.

I think that having a 24/7 place to physically go would be better than a telephone.

Other students found support from their educational institutions.

0%

Most of the supports in our community and at college are connected to community wellness and the healthcare field. My family was going through a lot of people passing away, so I've had to ask for help because I wanted to crawl into a ball and just stay there. It gets tiring because if you don't reach out and ask for the supports, how are you to know where to turn? Like there's others who can help point to the direction to get us help. There are a lot of supports out there and there are a lot of good people.

Activities and Participation

Respondents were asked about the frequency of their participation in a variety of community events such as *sports, religious,* or *other organized activities*. There were no significant differences between groups.

The following respondent accounts tell of their participation in various types of community activities.

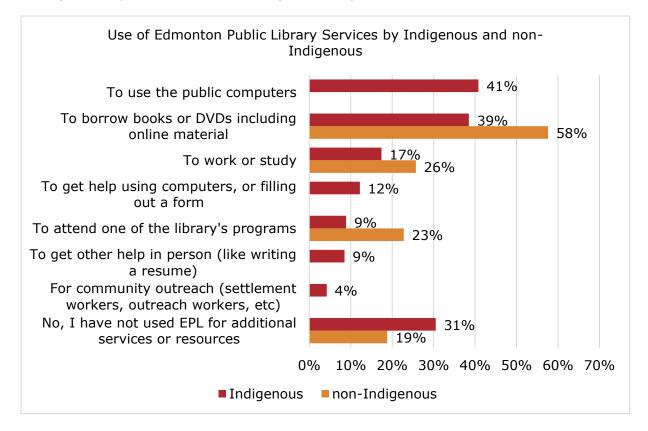
I have young boys so I volunteer at their school quite a bit and that was a good way to get to know everybody.

My friends give me a lot of support, going back to school, my older friends. They always ask me if I am still going, and I can tell that they are proud and I'm still playing hockey, they give me a lot of support.

It's being around friends and family and going out and doing activities. Not only drinking but actually other things, participation in sports or activities. I just started playing hockey again this year, and it really helped me connect with my old friends.

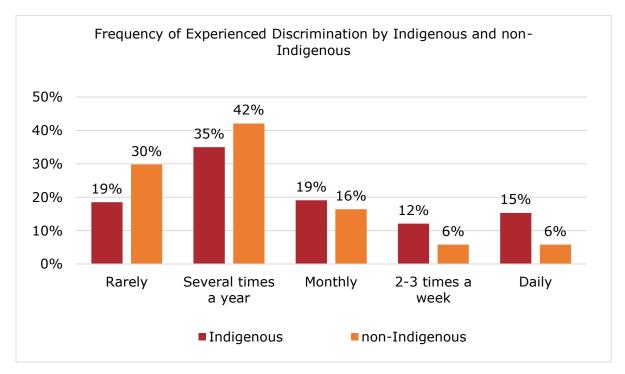
Use of Edmonton Public Library Resources

The Edmonton Public Library expressed an interest in learning which services were utilized by research participants. The most popular use of EPL was to borrow books or DVDs including online material. Note that proportions are only reported for non-Indigenous if they are significantly different than for Indigenous respondents.



Discrimination

Discrimination was described to respondents as *unjust treatment because of race, age, economic situation,* or *gender.* Eighty percent (80%) of Indigenous respondents indicated that they experienced discrimination. This proportion was much higher than for the non-Indigenous respondents at 51%. Indigenous participants more frequently experienced discrimination with an average of 2.71 falling between *several times a year* and *monthly,* compared with 2.16 for non-Indigenous respondents.



Participants who experienced discrimination encountered it in multiple areas of life. The following accounts provide a glimpse of their common challenges.

You see someone who's native and they just assume that they don't have any money so then they follow them. So even if I go in a store. The first thing you do is feel the eye drawn on you so I get what I need and walk out the door. At first, I was like I can't go back to that store, but then I realized, I can't let it get to me every time. And there is always going to be a reason why someone is following you around. You can either confront it, or ignore it and just keep moving on.

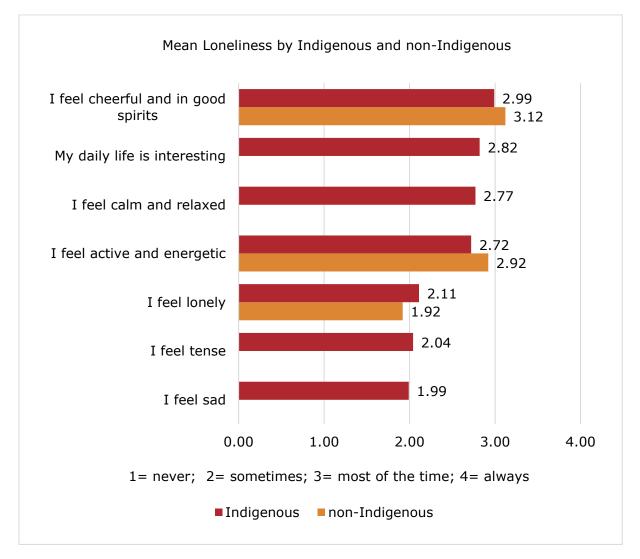
I hate taking cabs. I live on 118 [avenue] and have had cab drivers actually proposition me. Like, "are you one of those girls"?

I've learned to be with discrimination, like, whether subtle or blatant, but I've had things explained to me like I'm a two year-old, and I know that I probably know more than the person who's explaining but I've learned that I cannot be in an attack mode. I have to be humble, and I don't have to prove myself to anyone, but I would like to be given an opportunity to show others that I can do just as well as anyone else.

Social Capital Components

Loneliness

Significant differences were found on three measures. Indigenous participants had a lower frequency of feeling cheerful and in good spirits, or feeling active and energetic. They also felt lonely more frequently.



Many respondents work to overcome loneliness. For those living in the inner-city in precarious housing situations or with few supports, the services available to them are crucial. Inner city communities, whether formal through service providers, or informal through relationships where people look out for and help each other, mean survival for many marginalized people.

I'm not afraid to admit that I go out and have free meals, I meet people like complete strangers. If I'm lonely I just get in a bus and strike up a conversation with anybody. Just to talk to someone. Sometimes it's a happy conversation, sometimes it's mad.

Trust for Others

In all areas Indigenous participants had lower levels of trust than their non-Indigenous counterparts.

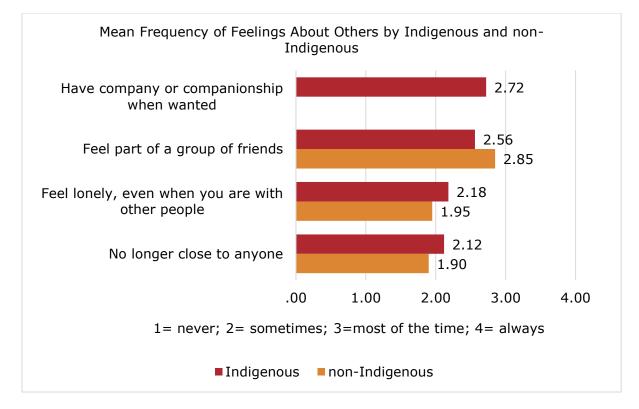


Some respondents talked about their commitment to building trust.

Take time to be trusting in looking for the supports when you have been turned away or you've been not treated fairly.

The more trust you give the more you get back.

Feelings of Connection to Others



On all measures Indigenous participants were less likely to feel connected to others.

Participants talked about the support they receive from community programs that create intentional community.

I think it's a really great place for our families to gather and socialize and to find friendship, to support each other and from the staff as well.

Yeah, this is the place, I come all the way here on the bus from the west side [across the city] with four kids aged ten and under, just to be with the people here.

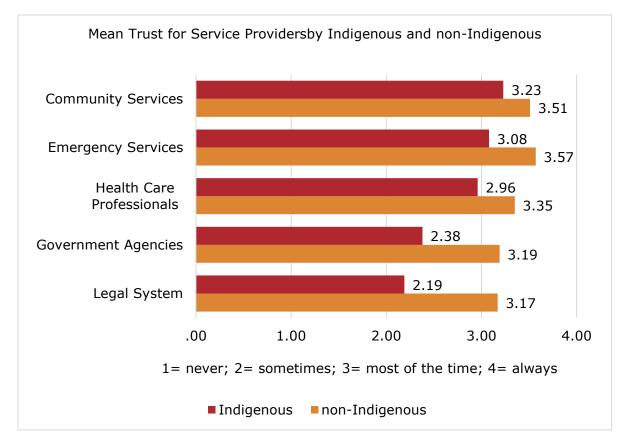
We were impressed with the first time we were here at [college name], with how much of a community we felt amongst the students; people really supported each other.

Feelings about Self

There were no significant differences between Indigenous and non-Indigenous respondents.

Trust for Service Providers

In all areas trust was lower for Indigenous participants than their non-Indigenous counterparts. Respondents often indicated that they had different levels of trust for one portion of a group than another. For example, one might hold a higher level of trust for emergency medical responders than for physicians. This level of detail in the data was out of scope for this study. Examples of differential levels of trust along with quotes are provided below.



Having attended a residential school had a negative effect on trust as respondents doubted themselves, and subsequently those around them.

When you are in the reserve and surrounded by people who are hurt, who are affected by residential schooling or you know, the ripple effect of it, you don't know how to evolve. You don't know how to grow. You see other people who are stuck and you think, "oh well maybe that's how I'm supposed to be".

Other respondents discussed the reasons for their distrust.

When other groups come in for mental health or the library, a lot of people are afraid to say anything. That feeling should not happen.

So it can take time to be trusting in looking for the supports when you have been turned away or you've not been treated fairly.

That's an issue right there. Being able to trust the police. When they come here, they come in groups of four. And they've got guns.

Community Engagement

The highest average measure related to the statement *I am free to decide how to live my own life,* where the average fell at 3.51 out of 4 which is halfway between *most of the time* and *always.* This measure was not significantly different than the average for non-Indigenous respondents showing that, regardless of the challenges respondents faced, they still felt a sense of autonomy over their lives. On all other measures, Indigenous respondents scored significantly lower than their non-Indigenous counterparts.



In focus group discussions, Indigenous respondents discussed their engagement in community, and how they develop ingenious ways to be connected when they are not comfortable with conventional avenues.

I lived all over Edmonton and I don't say that's my community because that's where my address is. I feel my community is Churchill Square. That's where I will go if I want to meet up, hook up with First Nations people. Any time, somebody's phones me saying "This person is missing, we haven't seen them. Can you please find them?" Sure, I will go downtown and I will go find them and sure enough, what "Moccasin Telegraph" does its duty to tell anybody that know this person where families wanting to hook up with them. So you don't need to go to the cops. You *don't need to go to the social agencies. If you are a native, you just go to the Churchill Square, you ask the people that are First Nations, they will hook you up.*

I see the struggle within my people. The thing is that we've all been put in our certain place to do the work that we have to do and we can do the work respectfully with each other. The thing is like on a grander scale, it's not just going to be the natives that heal themselves, it's going to take the collaboration of all the people together.

Another respondent discussed how healing will build community.

I really believe that we need to be able to return to who we are... through our traditional beliefs or whatever the belief is that we choose, it begins with our children. We have to restore those belief systems from our ancestors, we call it cope to win. It's a spiral that goes up and it consists of everything, our community, our people, our creator, all of that stuff. Having those values restored within our children, it's hope to the future because our ancestors always looked ahead seven generations for the future of our children. My Kookum and my grandfather taught me these things. I do not have all knowledge within myself, only the knowledge that I have. The older people are damaged too, the older are hurting too. We don't have Elders all the time anymore. When I grew up on the streets, struggling in homelessness and fighting through addictions and being an alcoholic for 16 years I didn't have somebody to come and quide me. The traditional way of life has been shattered, that sacred hoop has been broken. We need to love each other. That's the most important thing. You know what I mean? It's hard. In my culture, we tell this to our creator when we pray because you know that he knows. He knows it's hard. And that's the thing. I have seen lots of my friends die young because of the struggle. I have seen an 18 year old man, even like friends, like lost to the violence, lost all kinds of different kinds of things. This is my truth.

Fear related to lack of safety and violence in the community is a barrier to community connection.

Some people in certain communities don't have that freedom that a lot of us have because where they live in certain parts of the city, there is fear. So basically they are not free, not outspoken the way we can be. I always say I love where I live because there are different cultures where we all get along. We are all friendly to each other, we watch each other's back, but if you look at the side where my sister lives, they don't have the freedom to be like "I'm scared. I want to call the police" because the police don't come down there sometimes because there's so much domestic violence and drugs going on. I'm kind of different. I'll speak my mind but my sister lives in fear in that whole community. They don't rat on each other, just quiet. People shouldn't have to live that way. I can call the police if I feel or I have fear, and I know they're going to come and be very supportive.

A common theme of reciprocity, of helping and caring for each other without expecting an immediate reward and believing that helping others will build a better community, was evident. Building ones' own ability to help others was seen as a reason to build a better life.

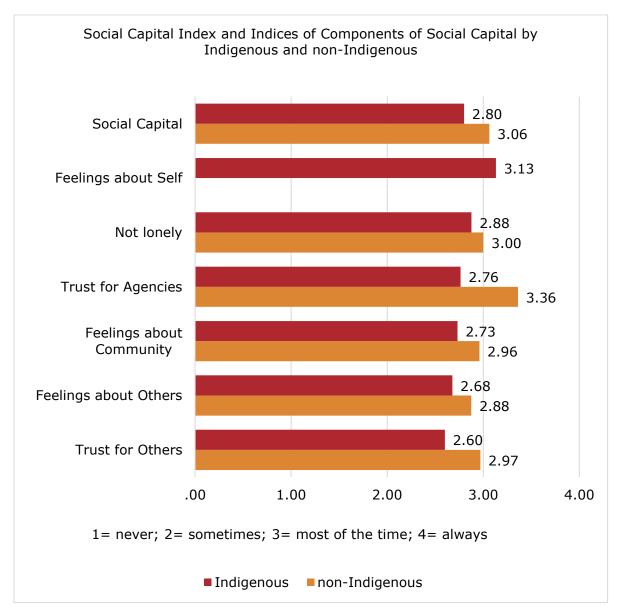
You participate, and you talk to your neighbour, you get yourself involved.

You are capable of helping others even though it's hard sometimes to help yourself.

I don't need to be part of a system to give back to my community.

Social Capital Indices

Indigenous respondents had a lower average Social Capital than their non-Indigenous counterparts at 2.80 compared with 3.06. With the exception of Feelings about Self all component indices showed significant differences with Indigenous participants ranking lower across all the remaining themes.



Causal Relationships

The significant influences found in the following regression analysis account for 9% of the change in Social Capital (adjusted $r^2 = .087$).

Significant effects are those where, with 95% or more surety that the difference in Social Capital is not due to chance. Three of the independent variables were found to have a significant effect on Social Capital; health, participation in spiritual or religious activities, and experiences of discrimination.

Good health positively affects Social Capital. For every measure of increase in health, Social Capital increases by 8% of one measure. There is 97% surety that this difference is not due to chance (b=.081; p=.030). Further research is needed to learn what is needed for Indigenous people to access the services and supports that are effective in supporting their physical, mental, and spiritual health.

	Unstandardized Coefficients		Standardized Coefficients		
	В	Std. Error	Beta	t	Sig.
(Constant)	2.600	.219		11.862	.000
Male=0; female=1	073	.058	091	-1.264	.208
Unattached=0; attached=1	024	.055	030	433	.665
Number of years in city	.000	.002	.018	.247	.805
Age	.003	.003	.081	.962	.337
Overall health: 1=poor to 4=very healthy	.081	.037	.158	2.191	.030
Highest level of education: 8 measures: none to advanced degree	009	.025	027	365	.716
Employed: no=0 yes=1	056	.095	040	587	.558
Currently attending school; no=0 yes=1	010	.039	022	254	.800
Problem with substance in the last 12 months: no=0 yes=1	039	.059	049	660	.510
Participate in spiritual/religious activities: 5 measures low to high	.058	.019	.230	3.085	.002
Ever homeless in Canada: no=0 yes=1	030	.073	035	414	.680
Frequency discrimination: 5 measures low to high	051	.018	213	-2.869	.005
Parent or self in residential school	070	.056	088	-1.254	.211

The frequency of participation in spiritual or religious activities also positively affects Social Capital. For every measure of increase in frequency of participation in spiritual or religious activities, Social Capital increases by 6% of one measure, with 99.8% surety that this difference in Social Capital is not due to chance (b=.058, p=.002). Further research into cultural and spiritual practice is needed as this study did not explore this area in depth. For example, our data is unclear about whether western Christian practices and indigenous spiritual practices work together or separately.

The more frequently one experiences discrimination, the more likely their Social Capital is to diminish. For every measure of more frequent discrimination, Social Capital decreases by 5.1%, (b=-.051, p=.005). Discrimination is endemic and is an overriding part of life for Indigenous Peoples. They experienced discrimination from those born in Canada as well as from newcomers to Canada who reported that they are socialized to discriminate against Indigenous Peoples. All other measures in the multiple regression were found to have no significant effects on Social Capital.

The following quotes relating to immigrants and Indigenous peoples show discrimination and misunderstanding. The first quote is from an Indigenous participant, while the second shows the confusion of an immigrant around the systemic discrimination of Indigenous Peoples.

Do you know what it's like to be marginalized and to have people from other countries come in and be racist against you and you are a First Person and this is your country? It happens to me on a daily basis. It happens to a lot of my people on a daily basis. You know, like, you guys... people will come to Canada and they won't really understand what racism is and then they will get socially defined into these groups, and then all of a sudden these groups think, "OK well, this is who we are, and we are only going to associate with these people, and oh, those are the Indigenous people...we don't want to be like them. We want to be like everyone else, so we're going to knock those Indigenous people". And that's in my own country.

For me, coming to Canada, I started working and then the first thing my coworkers would tell me whenever we got an Indigenous customer, they'd be like "oh, yeah, they're taking money from the government" or "that's all they do, they don't work." Like the stigma and the stereotypes just adds to me, coming to Canada. I didn't know what an Indigenous person was or what they looked like. But the immigrants that have been here longer, they easily recognize what an Indigenous person looks like, and then they will automatically think, since they're not in the Social Work program, they don't learn what they've been through, so whatever they learned from the same culture or what people told them, that's what they're going to believe until someone tells them the actual truth. And that's sad because I took the citizenship test recently, like a year ago, and the booklet doesn't even explain the whole history. I'm like, if I'm going to be a citizen here, I'm going to know what really happened or what the history really is.

Conclusions

Indigenous participants faced many challenges. Half reported poor health, while 2 in 5 had substance use problems in the past 12 months, measures that are proportionally higher than for non-Indigenous. A majority reported having chronic medical conditions or disability and 7 in 10 have been homeless at least once in their lifetime. While just slightly more than 1 in 10 had attended residential school, almost 9 in 10 personally knew someone who had attended. Indigenous participants were also much more likely to have experienced discrimination and with greater frequency. All of these conditions serve to create barriers to building a better life. They also erode ones' Social Capital and Indigenous respondents rated lower on many of those measures.

When we examine all the negative external forces that Indigenous people face, the amazing finding is that the Social Capital measure is as high as it is. In spite of many challenges there are no differences in feelings about self. In focus group discussions strategies to combat discrimination, an attitude of humility and acceptance, and a balance of when to challenge structures and practices was evidenced. A collaborator added to understanding with her description of Indigenous Peoples, *They are not drunk Indians, they are wounded warriors.*

Indigenous people showed their strength and resiliency in many ways. Many have embraced or returned to their culture and cultural practices in order build a better life. When they cannot see the path forward, many have created spaces and networks that allow them to meet their goals, an example of which is the *Moccasin Telegraph*.

Their struggle with poverty has led to many relocations, coming to the city to gain a better life through education, and having to move back to their home community due to poverty. Relocations to cities have positive potential but may come at the price of lost community and cultural connections.

The conditions which have brought Indigenous peoples to their present experiences in life are long lasting and far reaching. We are at a time of implementing the Calls to Action from the Truth and Reconciliation Commission of Canada (TRCC); a process that requires wisdom, patience, and fortitude. Marie Wilson, Commissioner for the TRCC frames this time of opportunity.

I believe reconciliation means that things, can, do, and will get better, but it will take time and we all need to play our part. On an individual level, we are beginning to see change in how we see, talk to, and talk about each other. On a societal and public policy level, as we change some of what we do, we must also change a lot of how we do it. Reconciliation means new thinking about who decided; about imagining and convening ethical spaces; about consciously deciding who is present in our decision rooms of our governments, our policy shops, our social services, our schools, and about who controls the resources that such decisions rely on.

5. Immigrant Subgroup

This chapter presents data on immigrants to Canada only, and for this study includes all who were born outside of Canada. Immigrants comprised 46% or 275 participants. Please read the larger report to understand methodology and general findings, explanations, and references.

Immigrant participants are only compared with Canadian-born participants when the differences between the two groups are significant at the level of 95% or more surety that the differences found are not due to chance.

Likert Scale measures used in this survey include:

- Rarely or never, several times a year, monthly, 2-3 times a week, and daily
- Never, sometimes, most of the time, and always

Quotes are provided with as little editing as possible to allow the voices of the participants to come through.

Demographics

Seventy-one percent (71%) of immigrant participants were female, with the remaining 29% being male. The higher proportion of females was largely influenced by the female dominated programs at NorQuest College where four of the data collection events were conducted (Social Work and Day Home Provider Programs).

Forty-five percent (45%) of immigrant respondents were in attached relationships (married or cohabiting). The mean age of immigrant participants was 39 years, younger than their Canadian-born counterparts at 43 years.

Sixty percent (60%) of immigrant respondents reported having children under the age of 18, compared with 45% for the Canadian-born, however, the mean number of children was lower at 1.98 compared with 2.69 for the Canadian-born. Immigrants were more likely to have intact families where 89% reported that their children under 18 years of age lived exclusively with them, compared with 60% for Canadian-born.

Living in the Community

Participants were asked how long they had lived in Edmonton. The range for immigrants was from less than one year to 56 years, with a mean of 6 years. Twenty-nine percent (29%) of immigrants had not moved in the past 12 months. For those who had moved (mean of 1.35 times), it was less frequently than the Canadian-born (mean of 2.06 times).

For those who come to Canada as refugees the need for help is greatest after their first year in Canada when the one year of financial support that refugees receive from the Federal Government or private sponsors runs out. This is especially true if they have not completed their English language studies, if they are retraining, or if they are waiting for their foreign credentials to be recognized. There is the added pressure of the restriction that does not allow them to apply for subsidized housing until after their first year in Canada, leaving them without affordable housing when it is most needed as the waiting time, from application to acquiring housing, may be several years.

We just need to settle down ourselves – we need to walk on our feet, then we don't need the [service agency] anymore. We need right now. Maybe after two, three

years our name will be on the list. Okay, now you can get (subsidized) housing, but maybe in that time I won't need it, I need it right now. So I think they need to dig up the issue of who needs it right now, the priority list.

Employment Status and Income

Participants were asked about their employment status. Immigrants were more likely to be employed than their Canadian-born counterparts at 34%, compared with 13%. They worked an average of 25 hours per week, more than the Canadian-born at 17 hours per week. The median annual household income was 29K for immigrants and 16k for the Canadian-born participants. 2016 Census data shows the median annual household income in Edmonton to be 87k.

The rent I'm paying for the apartment is \$1200 per month. It is not enough... at the end of the month I don't have a single dollar in my hands. Sometimes I have to loan from my friends. So life is very difficult here without money.

Immigrant respondents voiced their frustration with not being able to find employment, or employment commensurate with their education levels.

When you come here, one year passes – no job. Two years, and we even go to [for financial support]....it's frustrating. The type of questions they ask is as if you are coming to beg or maybe you are just being lazy. But when you come with a certain level of education, and you'll be pointed at things that, those minimum payment jobs. It's really, really frustrating, but we have no choice because we left home, we sold everything to raise the money to come here. But when we come here, it is a total different scenario. Maybe when we were back home, we had families to feed, people we were supporting with the income we had. But when you come here, you realize that the income is not there, you cannot support those people. It's frustrating.

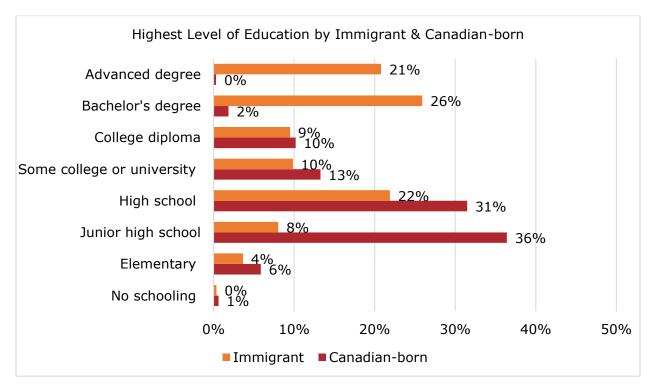
So if you don't struggle hard and hard and hard, if you don't make that sacrifice, you will fall in that poverty line, right? So taking student loans; first, we already have our loan back home, we already have a mortgage, house - everything back home. You come here, you take another mortgage to have a house, mortgage, to have a car, mortgage for student loan. And if you don't get a good job, how will you pay all those mortgages? So better do well and struggle and do whatever.

The basic challenge is Canadian experience. It's like building a credit history. If I don't get a credit card, how am I supposed to build a credit history? If I am not able to work for a Canadian employer, how I am supposed to build that Canadian experience?

Having a better life is not possible without having a job. First we need a job. And to utilize our skills and qualifications. When we come to Canada, we bring our education experience and all those things. We need to build our lives here. So first we need to get a job and use our qualifications and feel they are useful here. We can get back to our career path or we can build one here. But without having a job, it's not possible. After that, getting involved in the community with people in Canada, and getting the culture, will be helpful.

Education

Immigrant educational levels were considerably higher than Canadian-born with two thirds (66%) of immigrants and one quarter (26%) of Canadian-born with completed postsecondary programs. Almost half (49%) of immigrants were attending school either part- or full- time, at the time of interview, compared with 23% of the Canadian-born.



For many, although their education was a contributing factor in qualifying to immigrate, credentials from their home countries were not recognized or were undervalued in Canada. Moreover, the process to have foreign credentials evaluated is lengthy. Some return to school to retrain or to increase official language skills in the interim.

After two years, I went back to start again from the beginning to get a Canadian certificate. They have workshops, but right now I need networking or a way of connection to find a job. There are many job descriptions with the City of Edmonton or Government of Alberta – I applied but didn't get a reply. Maybe the community or government could think about accepting and hiring immigrants who have professional background/experience but less Canadian certificates/experiences. Start to find out and accept them as a community. I think it can work.

Barriers to Education in Canada

Respondents discussed their experiences with gaining education in Canada. They described barriers and challenges that were related to their own journey, or in supporting their children's education. Parents may not have the language or Social Capital to navigate processes and advocate for their children.

I knew a girl who was very mentally capable but she was still put in a very low class. She was put in a class for students who were mentally not as progressed which was a completely wrong and false assessment and the only reason she couldn't move out was because her parents couldn't speak English and couldn't communicate her needs or capabilities to the teachers. I think that is something that needs to be worked on, making that differentiation between that cultural barrier and learning disabilities is very important.

English Language Learning

Learning the official language is crucial to gaining independence and becoming a contributing member of ones' new community. Respondents were thankful for the supports they had to learn English. They also recognized the importance of overcoming barriers to learning and employed a variety of strategies.

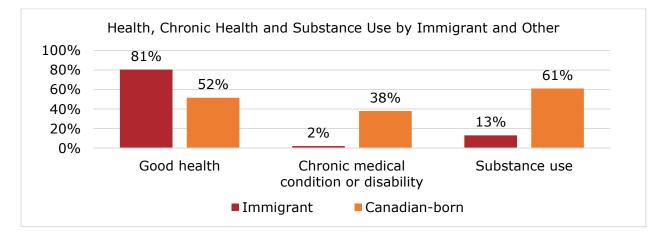
The first barrier is the language barrier. It's the main barrier in our new life because if we don't have language, we can't be full participants in this society. I really appreciate the help which for example, [agency name], gives us English learners, we can take free classes in here for speaking and listening, for practicing our speaking and language skills, and also we have some opportunities to have the LINC program.

English I think is what makes you just go on your own. When you speak the language properly, you don't get lost. You don't need to get lost on the bus, you just go on your own. After that, it's just shyness. If you're shy you will not be lost if you speak perfect language.

Health and Problematic Substance Use

Immigrants reported better health than their Canadian-born counterparts with a majority (81%) being *healthy* or *in excellent health*, compared with the Canadian-born at 52%. Immigrants are likely to have good health coming to Canada because health is one of the requirements for immigration.

Thirteen percent (13%) of immigrants reported having a chronic medical condition or disability, compared with 61% of their Canadian-born counterparts. Only 5 immigrant participants (2%) reported having a problem with substance use in the last 12 months, compared with thirty-eight percent (38%) of Canadian-born respondents.



One respondent talked about suppressing mental health problems.

We don't have any kind of mental health problems because we don't have time for that! Even if we have it, it's suppressed inside! So we don't have time to take selfcare. We talk about self-care, no! So it's just a never-ending struggle. Never-ending struggle.

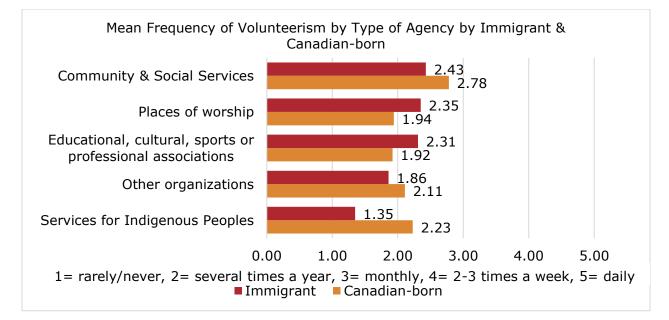
Homelessness in Canada

Immigrants were far less likely to report having ever been homeless (12%) compared with their Canadian-born counterparts (71%). Contributions to this significant difference may be a shorter time in Canada for immigrants. Furthermore, diasporic community connections among immigrants serve as a safeguard against homelessness. Established immigrants from the same culture often take in those who are facing homelessness.

Agencies reported increasing numbers of immigrants seeking food support. This group was often in precarious housing situations. Immigrant participants who were homeless reported that they did not know how to navigate being homeless. Some refugee respondents talked about how their family breakdown led to their homelessness. Being homeless after surviving through war and seeking refuge in many countries before coming to Canada, was a difficult ending to their journey.

Volunteerism

The majority of immigrant participants (62%) volunteered within the past 12 months, compared with 48% of their Canadian-born counterparts. Immigrants were more likely to volunteer with education, cultural, sports or professional associations, as well as with places of worship. The following table shows the mean frequency of volunteerism.



Immigrant participants saw volunteerism as a way to learn about Canadian culture, the labour market context, and to expand their networks. It was also a way to demonstrate skills, build networks, and gain Canadian experience.

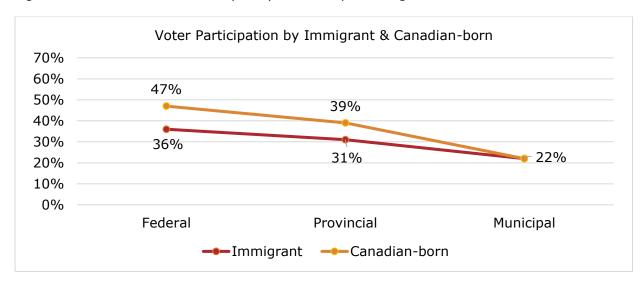
The first thing that I did when I came here was look for volunteer opportunities and then I signed up for one organization for a mentor because I used to teach back home.

When I came to Canada, I first started volunteering.

But I like my neighbours, every neighbour, I connect with them. With different cultures, everybody knows me, I know everybody. I help with my community, I do some job to volunteer, donation. I'm okay with that.

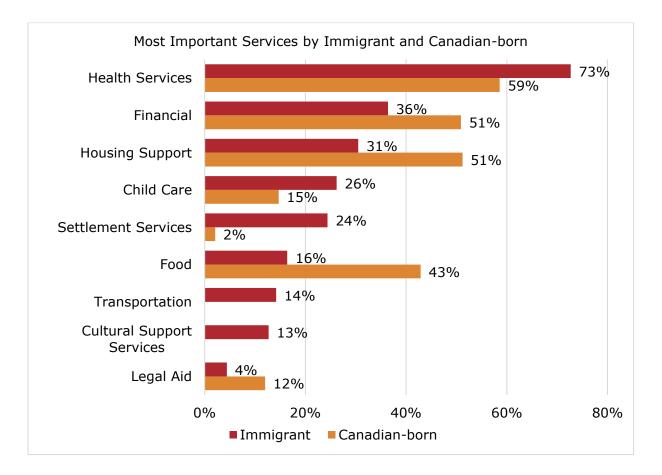
Voting

Immigrants were asked whether they voted in municipal, provincial or federal elections. Both federally (36% vs. 47%) and provincially (31% vs. 39%) immigrants who were eligible to vote were less likely to vote than their Canadian-born counterparts. There were no significant differences in the frequency of municipal voting.



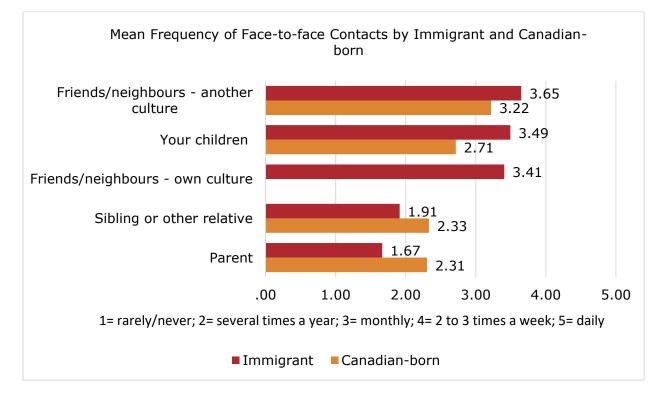
Most Important Services of Sources of Help

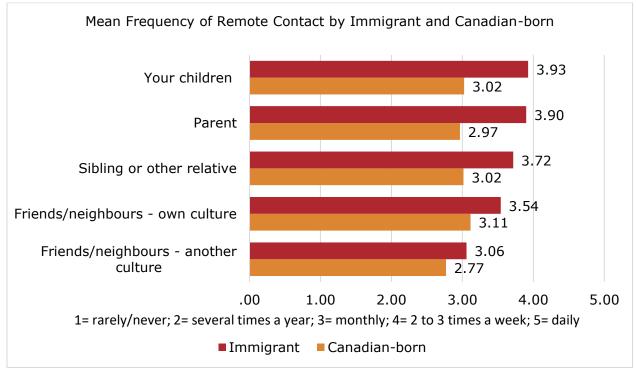
Participants were asked to identify the three most important sources of help they received from agencies or government, either in the past year or at the time they needed service. While immigrants' top three needs matched that of the Canadian-born, the proportions of respondents indicating those needs differed. With the exception of transportation and cultural support services, there were significant differences in the proportions of participants indicating needs.



Contact with Others

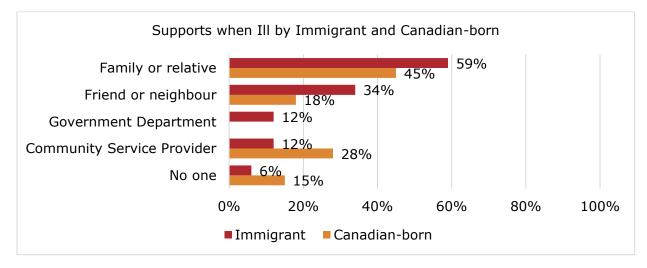
There were many significant differences between immigrant and Canadian-born participants. It is important to consider that relatives and friends of immigrants were more likely to reside in their country of birth or other areas of the diaspora than in Canada.

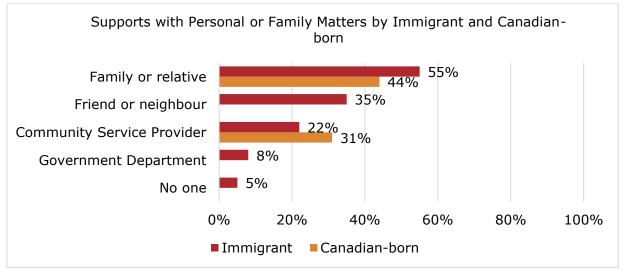


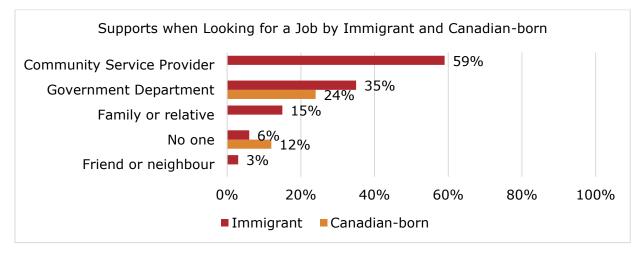


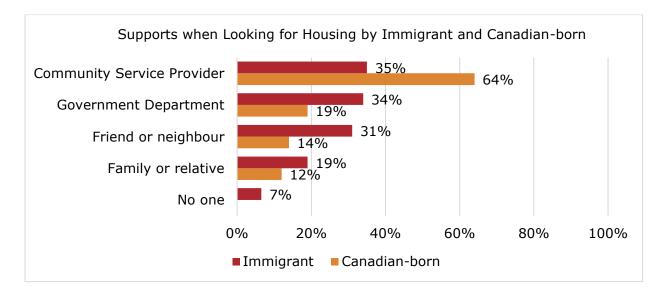
Support Systems

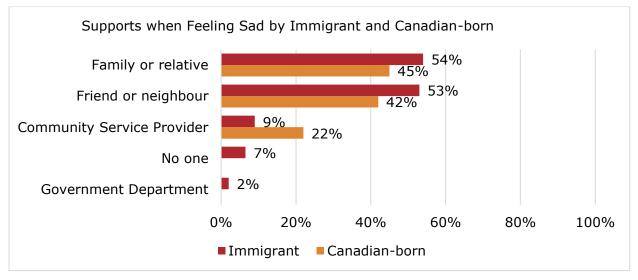
Participants were asked who they would call on if they were in a situation where they needed support. The situations when support might be needed are represented in the following charts.

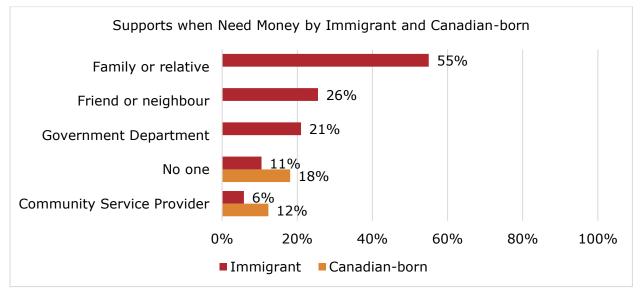












Newcomers also identified types of support they received and how they felt part of a community and part of Canadian society.

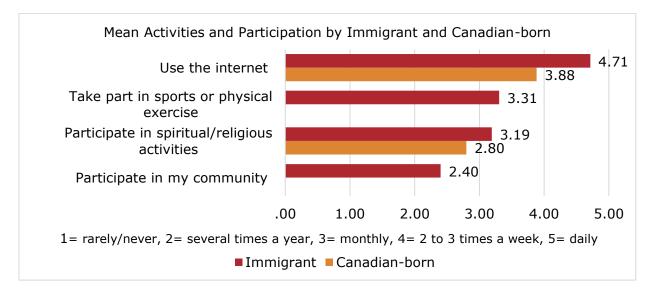
It's not just physical support, but emotional support is important, cause you are far from your family, you are far from your friends, you are far from your own land, your customs, so that's the most important.

Accounts of community support were varied. One respondent talked about the difficulty of having no supports at a time when she was pregnant and unable to work.

I'm a newcomer, I actually was pregnant when I came, I had no place to stay. I was able to get an apartment, but if I did I was scared of running low in my account so I decided to stay in shelter for a while. And I was pregnant. So when I was in the shelter I would have to squish in a little bunk. I was there for four months, and I couldn't get a job, at the same time no one was willing to hire me because I was pregnant.

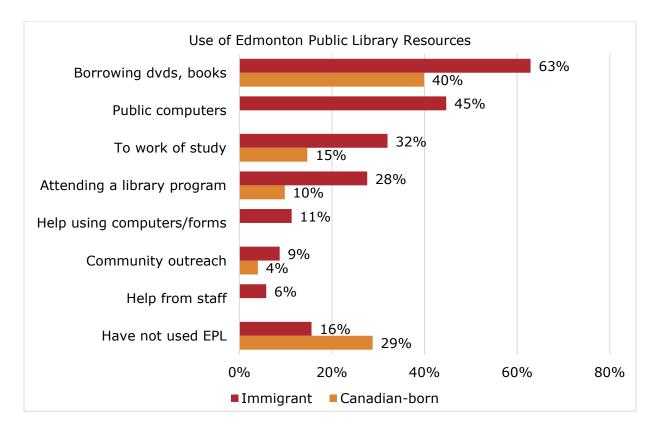
Activities and Participation

Using a scale of 1 to 5 where 1 means *rarely or never*, 2 means *several times a year*, 3 means *monthly*, 4 means 2 to 3 times a week, and 5 means *daily*, respondents were asked to rate the frequency of their feelings of connection and participation in their community.



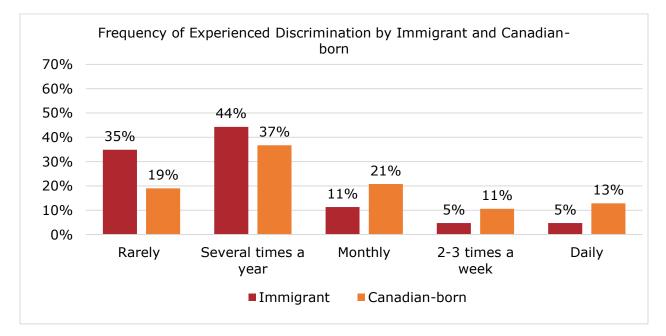
Use of Edmonton Public Library Resources

The Edmonton Public Library (EPL) was interested in learning which services were utilized by participants. The most popular use of EPL resources was to borrow books, DVDs, or other materials. In many areas of service, immigrants were more likely to use library services than their Canadian-born counterparts. Proportions for the Canadian-born participants are presented on the following graph only where there were significant differences in usage by group.



Discrimination

Discrimination was described to respondents as *unjust treatment because of race, age, economic situation, or gender.* Forty three percent (43%) of immigrant respondents indicated that they experienced discrimination in Canada, compared with seventy-five percent (75%) of their Canadian-born counterparts.



For immigrants, this lower frequency of discrimination may be explained in part by newcomers not wanting to say anything bad about their new country and society (the honeymoon effect). It also may be because experiences of discrimination prior to coming to

Canada were much worse comparatively, or because discrimination in Canada is often covert.

The proportion of those who reported experiencing discrimination seems low when we consider the accounts of discrimination offered at the focus group discussions. Some respondents felt that discrimination resulted from others not understanding the difficulties and challenges of settling in Canada.

It's very hard for us because people over here, they don't understand what kind of problems we are getting. One of the teachers when I wanted to leave school, she asked me "Why are you people over here? Because of money, you are coming here. You are saying that you were very well settled over there and why are you coming over here then? You are coming here in college for getting the money.

Others talked about the strong dislike of anyone different and the idea that newcomers do not contribute to society.

I think most Canadians they don't take (us) as people, they take us as animals.

Most of the people they say "oh those black people are eating our money, they are just having babies and sitting at home, they are just eating our money, and we have to stop them getting the home". I was like "you guys, we are strong, even if we are from Africa. We are strong, we can work, but nobody give us a job maybe because we don't have high degree, or we are not white as you guys, but we can work anything."

Another respondent found a way to rationalize the discrimination she felt through a new understanding garnered from education.

I'm affected when I saw discrimination... you feel sad, you want to cry, and my children will feel the same thing. But when I went to school in the Social Work program, I have understood the whole concept. Now I don't feel bad if I ever feel discriminated, because I feel - this is their education, they were educated like that.

It is especially difficult when one's child experiences discrimination or begins to idealize the dominant culture.

My child two days ago she came back from the school, she was crying. And then I ask, how was school? She told me no, the students were laughing about my hair, you know? So I said – why, what happened to you, your hair? "They say I have ugly hair, I don't have straight hair like them."

Some respondents felt caught between their birth culture and that of their new Canadian culture.

I was either too black for the white people or too white for the black people.

It's not necessarily the way that I look when it comes to the people in my community. Rather, like, the way I sound or, like the values that I hold...they've always assumed that 'oh, you're whitewashed, or you've been in Canada for too long", when really it's never been like that, it's just who I am.

And when you like something else, they say "oh, you've become too westernized, you're forgetting your roots." And you're thinking I've always thought and felt this way, people would not like this at home. It's only that now, in this environment, I'm more free.

Others had little or no experience with discrimination prior to coming to Canada.

The main reason for myself, I'm talking about myself – when I first came to Canada, I didn't know about racism. There's no white or other people in my country, they came maybe for a visit, like tourist, I'd never seen – maybe that's why I don't know about racism. I'd never seen. And we were never colonized in Ethiopia, so we didn't see that kind of thing.

Finally, other respondents were surprised that Canadian-born Indigenous people suffered so much discrimination and that Indigenous history was not part of their citizenship training.

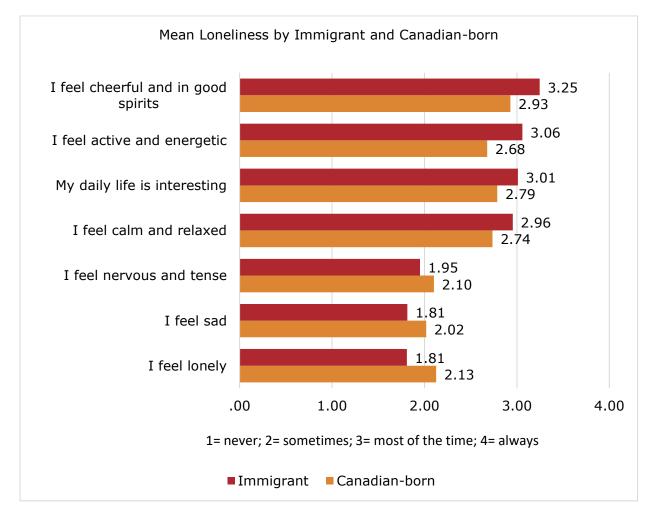
I work with different kinds of people, and the way they would refer to Indigenous persons was really shocking. I'm an immigrant, how do you think that's supposed to feel? When you say these things, think about an Indigenous person? I see even in their interactions, they're more accepting of me, who looks different, sounds different, from a different country, than an Indigenous person. So that was one of the things that really shocked me and is still confusing to this day. How can you love me, an immigrant, a foreigner, I can wake up tomorrow, pack up my bags and leave Canada – and you cannot turn to your brother, your sister who is here – how does that work?

For me, like coming to Canada, I started working and then the first thing my coworkers would tell me whenever we got an Indigenous customer, they'd be like "oh, yeah, they're taking money from the government" or "that's all they do, they don't work." Like the stigma and the stereotypes just adds to me – coming to Canada, I didn't know what an Indigenous person was or what they looked like. But the immigrants that have been here longer, they easily recognize what an Indigenous person looks like, and then they will automatically think, since they're not in the Social Work program, they don't learn what they've been through, so whatever they learned from the same culture or what people told them, that's what they're going to believe until no one tells them the actual truth. And that's sad because I took the citizenship test recently, like a year ago, and the booklet doesn't even explain the whole history I'm like, if I'm going to be a citizen here, I'm going to know what really happened.

Social Capital Components

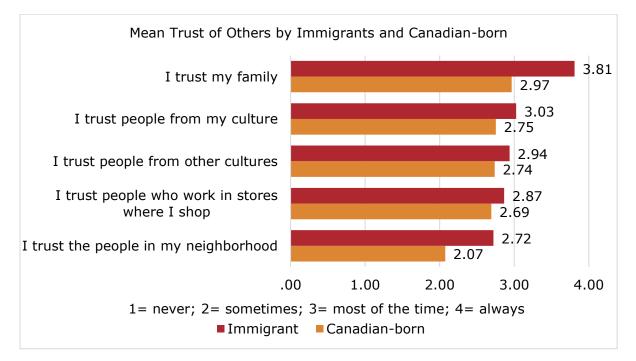
Loneliness

Significant differences were found on all measures. Immigrant participants had higher mean scores on the positive elements of lack of loneliness and were also less likely to feel *nervous and tense, sad*, or *lonely*.



Trust for Others

In all areas immigrant participants had higher levels of trust for others than their Canadianborn counterparts.

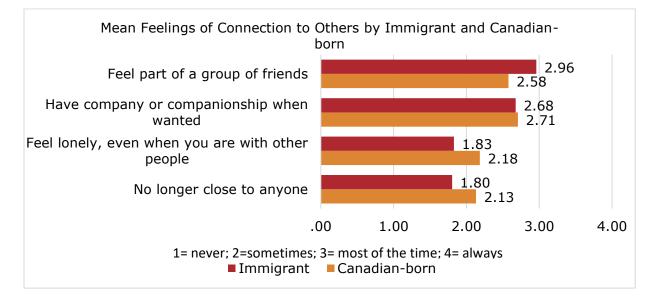


An immigrant student with primarily Indigenous classmates, talked about the complete acceptance she experienced.

I love you [other students]. It's the first time no one is going to ask me where I came from, who I am, and I love your community.

Feelings of Connection to Others

Immigrants were more likely to *feel part of a group of friends* and to *have company or companionship when wanted*. They were less likely to *feel lonely even when with other people* and to *no longer feel close of anyone*.



Immigrant respondents found support in many ways. Those who were connected to settlement agencies used these contacts, beyond the structures offered by the organizations, to develop personal networks with other newcomers or established immigrants.

Today in our group, one member did not come, did not turn up and she is carrying [is pregnant]. So we were like quite concerned. So we immediately put a message like "You had told us to meet here". So we were sitting and thinking about her..., she felt happy and she said "No. I'm actually taking rest". But she felt very comfortable when the group immediately checked on her.

Building a support network of newcomers from many different cultures was an empowering experience for many participants.

The group, we were victorious itself. It's a multicultural group where we have Filipinos, Columbians, we have Indians, and we have Moroccans. What we had to do to get all of us in one group is we created a group on "WhatsApp" which is the social networking over the phone. I took charge of the group, like an administrator. And we have group chat every day as to what we are doing, the opportunities we come across.

One good thing I have seen here in Canada is that networking is very helpful especially to newcomers. The first time that I attended a networking event I really didn't know it was called networking and I didn't know how to approach people. I just went there because I wanted to really listen to the discussions but then when I started going here at [school name] I learned how to really talk and build networks so the last time I went to the [school name] for the career celebration in research, I was able to approach the professor that I started to read when I came here. It was so fantastic to meet with him and talk to him about their research because it is quite aligned with the research I was doing back home. So, it is actually empowering.

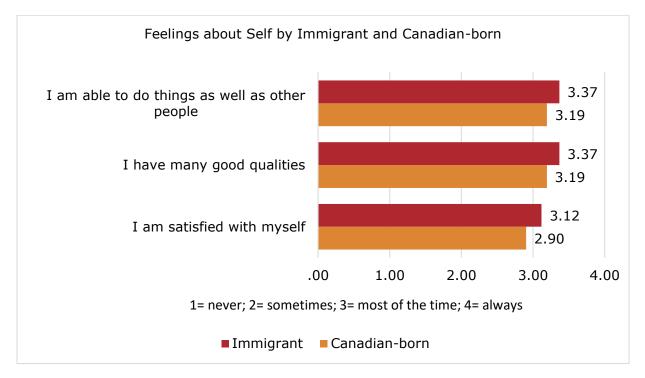
Respondents talked about the value of community connections and belonging.

In the neighbourhood we have a community. We have to be involved in our community. Because in Canada, people come from different countries and different cultures. If we haven't been involved in our community, how should we know about other cultures?

I think sense of belonging is very important for each one of us because this gives us comfortable feeling and this helps us to make sense of our lives and feel that we make a difference for something or for someone. Without this sense, I think people are lost in their lives. It's about finding souls that talk to you, if you understand what I mean. There's expression about love that love is not looking to the eyes of each other but looking at the same direction. The same thing probably about belonging because people have common values, common beliefs, common things that are important to them that talk about them. And this makes stronger bonds than any other things.

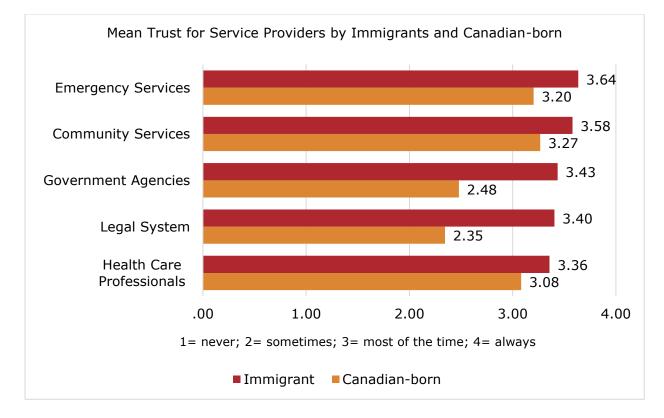
Feelings about Self

On all three measures immigrant participants were more likely to have positive feelings about self.



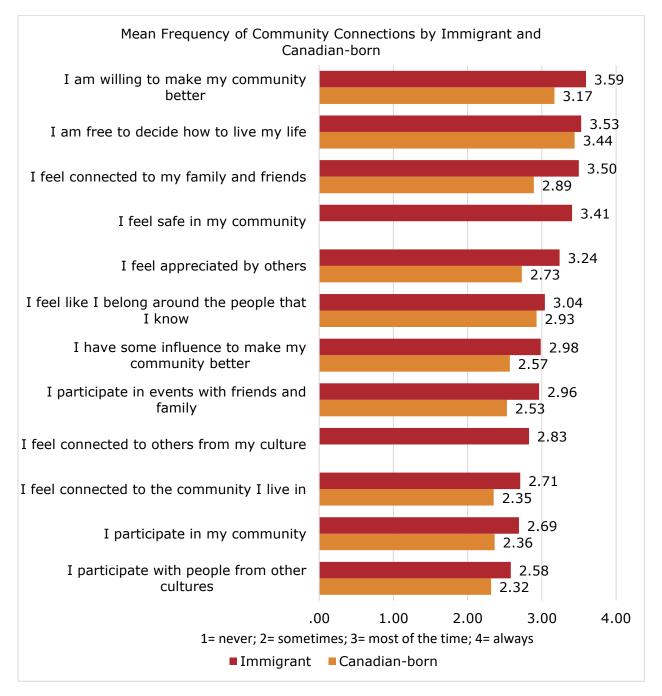
Trust for Service Providers

Regardless of the type of service, immigrants were more likely to trust service providers.



Community Connections

On all but 2 of the measures there was a significant differences between immigrants and Canadian-born respondents.



Many immigrants actively sought connections and felt part of the community.

I make Canadian friends, I go out in the parks, invite people to our home. I invited the director and the teacher from the center. When I came here, I didn't have anyone here, so you have to go out, you have to be social to learn the language.

Given that Canada has accepted me as a member of this society, of this beautiful society, I feel that I am part of this community, and I feel like I am a member, accepted in this society.

Some immigrants found connection to religious communities, while others wished for the religious community they left behind.

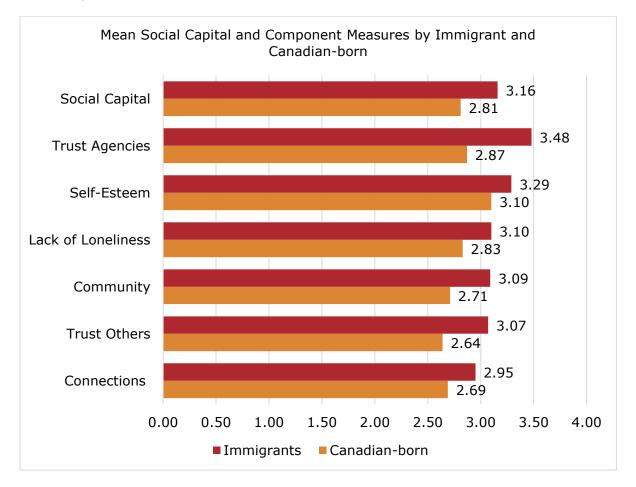
We organize a small prayer on the weekend and then we do a potluck and sharing and helping each other to keep that culture, that religion thing going on and this is how we connect. So I miss that part. We don't have enough religious and cultural places to go...to like, feel like this is for... this is me, this is our culture, this is our past.

One participant talked about the graciousness of Edmontonian's efforts to make her feel comfortable speaking English.

When I moved to Edmonton I know it is English, I had difficulty to express myself because when I speak to people, I say "I'm sorry my English is bad" they say "you are doing good."

Social Capital Indices

Immigrant participants had a higher mean Social Capital at 3.16 than their Canadian-born counterparts at 2.81. They also had higher mean scores on all of the component indices of Social Capital.



Causal Relationships

Five independent measures in the regression equation have a significant influence accounting for 19% of the change in Social Capital (adjusted $r^2 = .185$).

Social Capital was significantly positively influenced by age, and health. For every ten years of age one was 7% of one measure higher on the Social Capital Index (b=.007; p=.020). For each measure of increase in health, Social Capital increased by 11% of one measure (b=.107; p=.002).

Social Capital was significantly negatively influenced if one had a problem with substance use, had ever been homeless in Canada, and as the frequency of experiencing discrimination increased. For every measure of increased frequency of discrimination Social Capital decreased by 8% of one measure (-.077; p=.000). If one has ever been homeless in Canada, Social Capital decreases by 23% of one measure (b=-.225; p=.005). Finally if one had a problem with substance use in the past 12 months, Social Capital decreased by 54% of one measure (b=-.538; p=.004).

Unstandardize		Standardized		
d Coefficients		Coefficients	t	Sig.
	Std.			
В	Error	Beta		
2.832	.207		13.692	.000
072	.056	084	-1.280	.202
013	.062	014	217	.828
001	.003	026	317	.751
.007	.003	.171	2.347	.020
.107	.034	.190	3.141	.002
024	.014	114	-1.697	.091
.066	.050	.079	1.323	.187
023	.026	056	868	.386
538	.184	185	-2.918	.004
018	016	068	1 108	.269
1010	.010		11100	1205
225	.080	187	-2.817	.005
077	.020	230	-3.840	.000
	B 2.832 072 013 001 .007 .107 024 .066 023 538 .018	d Coefficients Std. B Error 2.832 .207 072 .056 013 .062 001 .003 .007 .003 .007 .034 024 .014 .066 .050 023 .026 538 .184 .018 .016 225 .080	d Coefficients Coefficients B Error Beta 2.832 .207 072 .056 084 013 .062 014 001 .003 026 .007 .003 .171 .107 .034 .190 024 .014 114 .066 .050 .079 023 .026 056 538 .184 185 .018 .016 .068 225 .080 187	d Coefficients Coefficients t B Error Beta 13.692 2.832 .207 13.692 072 .056 084 -1.280 013 .062 014 217 001 .003 026 317 .007 .003 .171 2.347 .107 .034 .190 3.141 024 .014 114 -1.697 .066 .050 .079 1.323 .023 .026 056 868 538 .184 185 -2.918 .018 .016 .068 1.108

Conclusions

For the immigrant respondents common challenges were often related to housing, low household incomes, and employment. Immigrants were less likely to face challenges of poor health, problematic substance use, and homelessness, however, they struggle with understanding Canadian culture, learning how to network, and establishing community in their new country.

Many of the challenges newcomers face are of a temporal nature, and occur during the first years in Canada. Access to affordable housing, credential recognition, language learning and labour market entry are often lengthy processes and for many, savings, or the 1 year of government support run out before they are self-sustaining. It is important to note that service agencies work diligently to provide services to newcomers and to help with these challenges. To help ease the process of settlement some suggestions given by immigrant participants included:

- Give newcomers more opportunities to gain Canadian work experience
- Offer more affordable housing
- Eliminate the one-year wait to apply for subsidized housing
- Make the process for credential recognition easier
- Offer educational programming that measures lacking skills and fills the gaps rather than retraining programs.

6. Canadian-born non-Indigenous Subgroup

This chapter focuses on respondents who were born in Canada and are non-Indigenous (CBNI). Please read the full report to understand methodology and general findings, explanations and references.

Differences between CBNI respondents and all others will be reported when the differences between the two groups are significant at the level of 95% or more surety that the differences found are not due to chance. In this section the term *Other* refers to anyone who is an immigrant or Canadian-born and Indigenous.

Likert Scale measures used in this survey included:

- Rarely or never, several times a year, monthly, 2-3 times a week, and daily
- Never, sometimes, most of the time, and always

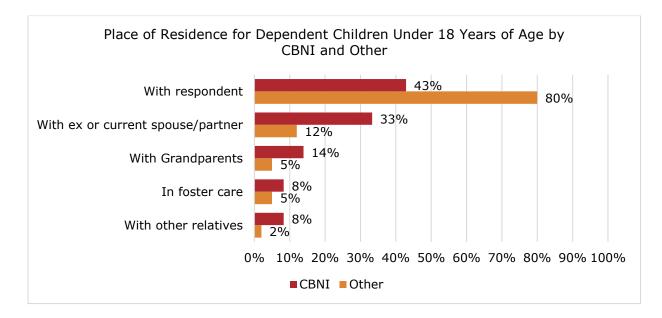
It is not possible to identify CBNI participant voices in the qualitative data, as there were no focus group discussions that were exclusive to this group. Quotes that are presented in this report come mainly from open-ended responses in the quantitative data.

Demographics

CBNI respondents accounted for 19% or 115 participants. The majority of these participants were interviewed at sites that provide feeding and basic necessities, or programs for those living with addictions or who were HIV positive.

The average age of CBNI respondents was 44, significantly higher than Other respondents at 41 years. Within this group males (58%) outnumbered females (42%). CBNI respondents were less likely to be in an attached relationship at 33% compared with 63% for Other respondents.

Thirty percent (30%) of CBNI respondents reported having children under the age of 18 years, significantly lower than for Other respondents where the rate was 57%. Those who had children had fewer at 2.03 compared with 2.32 for Other respondents. Forty-three percent (43%) of CBNI parents reported that their children lived with them, compared with 80% for other parent respondents. Another third (33%) of parent respondents reported that their children lived with an ex or current spouse or life partner who was not living with them.



Living in the Community

The mean of 24 years in the community for CBNI respondents was double that of Other at 12 years. Although a lower proportion on CBNI respondents had moved in the past year (18% for CBNI vs. 30% for Other), there was no significant difference between groups for the amount of times moved at a mean of 1.5 for both.

Income

CBNI respondents reported significantly lower household incomes than their Other counterparts with a median annual income of 17K compared with 19K for Other. Given their very low incomes it was common for participants to feel disenfranchised.

When you're on welfare or something it seems like they just want to keep you stuck there because of your past experiences.

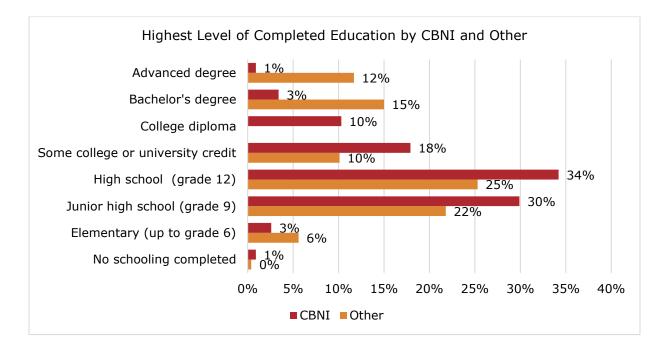
I'm really struggling, I feel that I'm barely living, where I'm supposed to be living.

Employment

There were no significant differences in employment data between CBNI and Other respondents. A small majority (57%) were not seeking employment. For the 43% who were in the labour market either employed or seeking employment just less than half were working. The average hours worked per week was 18.

Education

CBNI respondents were less likely to be attending school at the time of interview (16% vs. 39%). A small majority (55%) of those not attending school did not plan to pursue further education. The top reasons were medical or disability or having no desire to do so. Sixty-seven percent (67%) of CBNI respondents had completed a high school education or higher, compared with 72% of their Other counterparts.



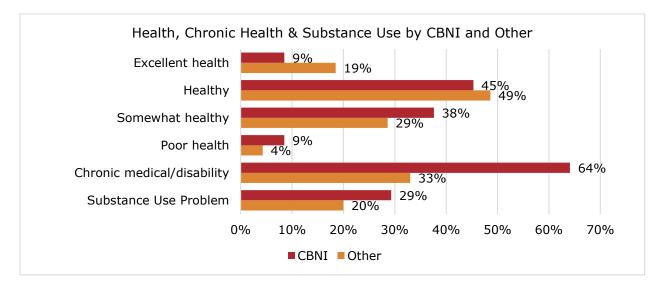
First Language

Eighty six percent (86%) reported English as their first language, followed by French at 3%. Twelve respondents reported a first language other than English or French.

Health and Problematic Substance Use

CBNI respondents were more likely to report poorer health than their Other counterparts (47% vs. 33%). A majority of this group (64%) also reported having a chronic medical condition or disability. They were also more likely to report substance use problems within the previous 12 months.

Some respondents discussed the discrimination they encountered when trying to access health care. They talked about having to go to other neighbourhoods to see physicians after being treated badly at local clinics.



Homelessness and Housing

CBNI respondents were almost twice as likely (73% vs. 38%) to report having been homeless at some time in their life. The proportion of respondents experiencing homelessness at the time of interview was 1 in 4 for all participants. The average number of times homeless in the past five years was 2.4 compared with 1.7 years for their Other counterparts.

Voting

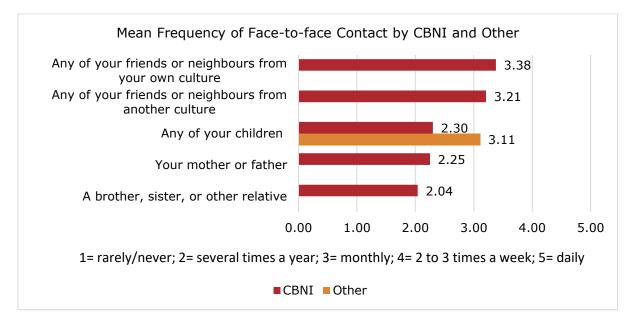
There were no significant differences in voter turnout by CBNI and Other respondents at any level (federal, provincial, municipal).

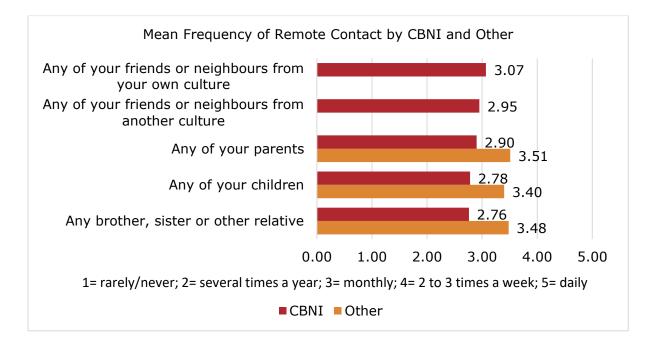
Most Important Services or Sources of Help

Participants were asked to think about the three most important sources of help that they received from agencies or government, either in the past year or at the time they needed services. While CBNI participants matched their Other counterparts when it came to assessing the importance of Health Services and transportation supports, they placed higher importance on financial, food, and legal supports. This importance was expected given their lower incomes and the types of sites they were interviewed at.

Contact with Others

Respondents were asked about the frequency of their contact with others; both face-to-face and remotely (via phone, skype, internet, etc.). The frequency was measured on a scale of 1 to 5 where 1 means *rarely or never*, 2 means *several times a year*, 3 means *monthly*, 4 means 2-3 times a week, and 5 means daily. Means for each measure are shown and the higher the mean, the more frequent the contact. Again, note that statistics for Other are only reported if there are significant differences.



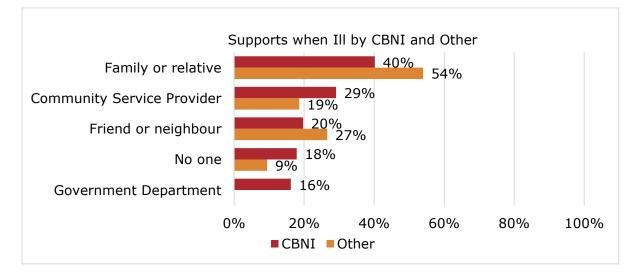


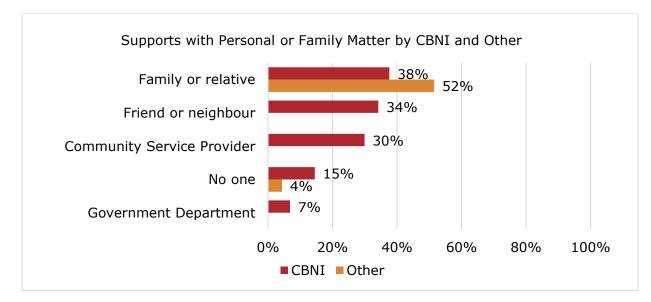
Support Systems

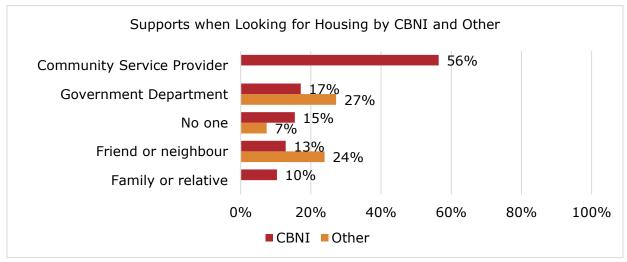
Participants were asked who they would call on if they were in a situation where they needed support. The situations when support might be needed are represented in the following charts.

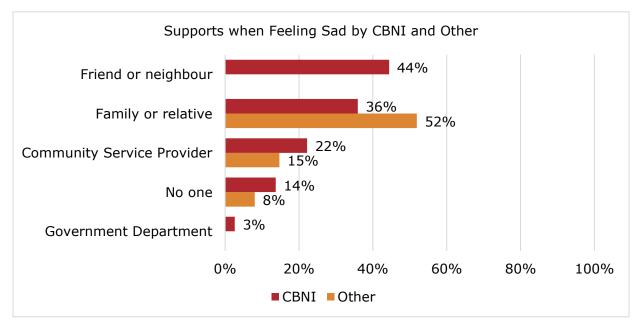
Where significant differences between groups appeared, CBNI participants were less likely to have someone to go to for support. They were also less likely to be in attached relationships, contributing to their lower proportions of being able to contact family or relatives for support. Furthermore, this group was significantly more likely to say they had no one to turn to on four out of the five measures.

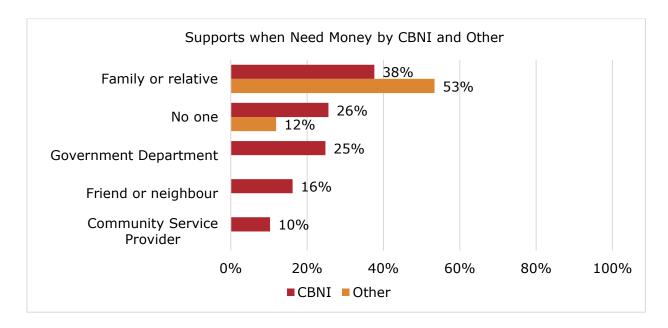
There were no significant differences between groups with regards to looking for a job.





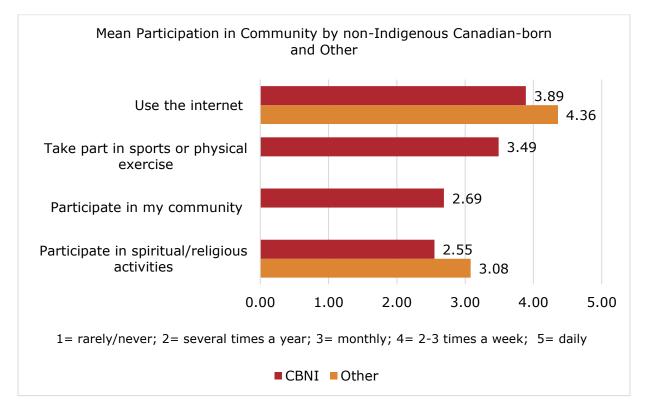






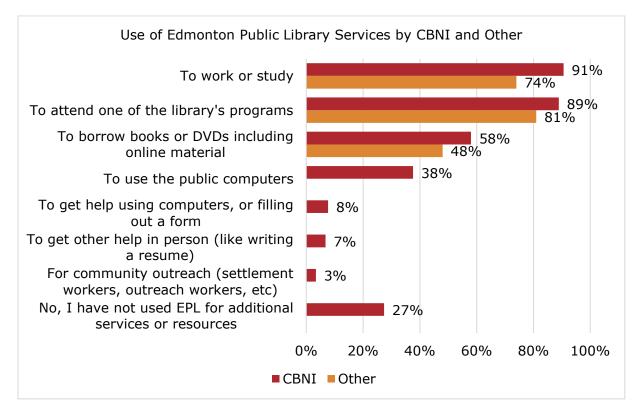
Activities and Participation

CBNI respondents used the internet less than their Other counterparts, however this proportion was most likely due to access. They were also less likely to participate in spiritual or religious activities.



Use of Edmonton Public Library Resources

Participants were asked which EPL services they used. CBNI participants were more likely to use library services in three categories. This finding was expected because this group had few supports and the library provided a welcoming space to escape cold weather, to be with others, or to browse the materials.



Discrimination

Discrimination was described to respondents as *unjust treatment because of race, age, economic situation, or gender.* Sixty-seven percent (67%) of CBNI respondents indicated that they had experienced discrimination with 39% reporting experiencing discrimination on a monthly or greater basis. There were no significant differences in the experience or frequency when compared with Other participants.

Discrimination is not restricted to colour or culture and those who discriminate are not exclusively white. Respondents cited a variety of causes for the discrimination they experienced such as ageism, gender, mental illness, religion, sexual orientation, poverty, and addiction.

Employers don't like my alternative appearance or face piercings.

I mostly experience discrimination from my family because *I* am not financially viable.

I've been told I look mentally challenged, a waste of skin, retarded, obese.

People discriminate for how you look when you're garbage picking from the public trash receptacles.

Other respondents talked about reverse discrimination by being excluded from services, or by being expected to be racist because of being white.

Others expect that I am racist because I am white. Being male Caucasian, I am expected to never need supports... keeps me from getting services being the minority in a home complex where I am the only white person.

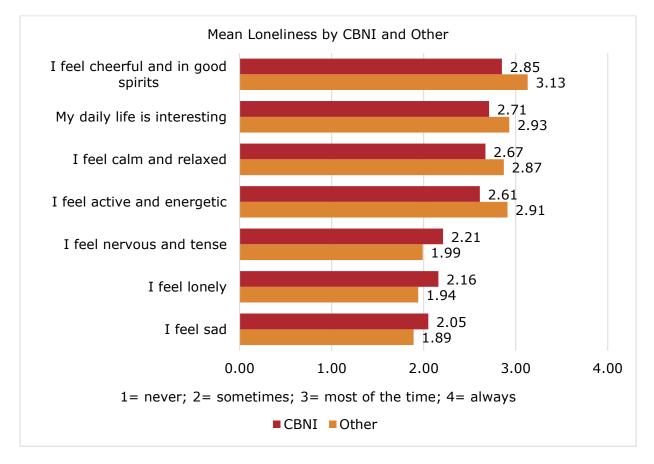
Being white, when in need of services I am pushed to the back of the line.

I look white and well-presented so I have received negative comments for accessing free meals or bread at [agency name] *and other places from fellow clients even though I am as poor as they are.*

Social Capital Components

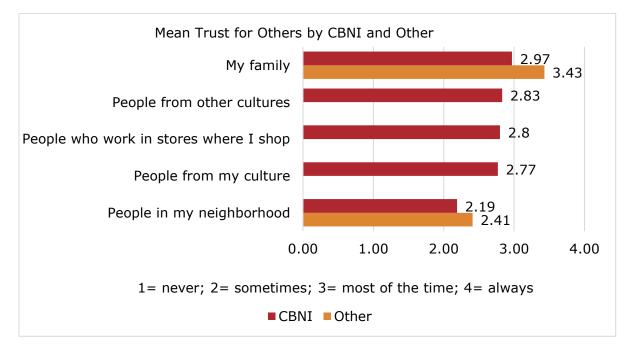
Feelings of Loneliness

Significant differences were found on all measures, with CBNI respondents scoring lower on protective measures against loneliness (top four) and higher on measures of loneliness (bottom three).



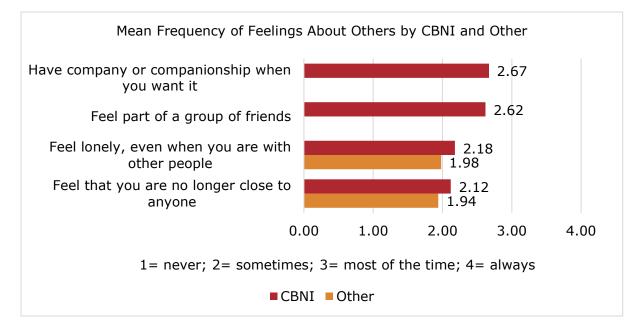
Trust for Others

CBNI respondents placed significantly lower trust in family and people in their neighbourhood than their Other counterparts. There were no significant differences in the other three measures.



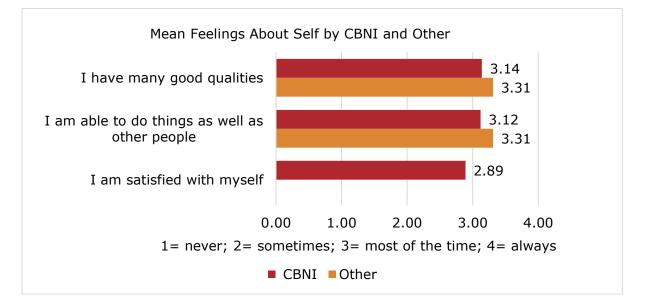
Feelings About Others

Significant differences between CBNI and other respondents were found on the two negative measures with CBNI feeling a greater separation from other people.



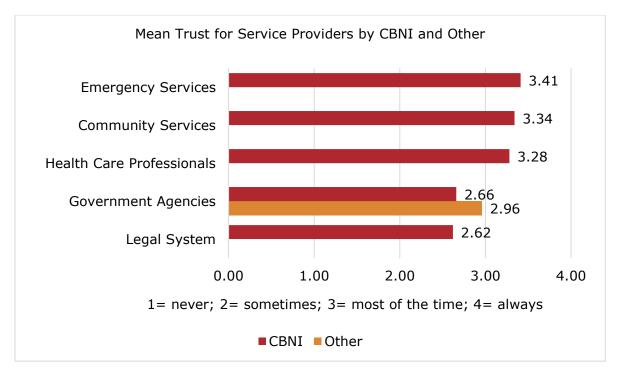
Feelings About Self

While there were no significant differences with regard to being satisfied with one's self, CBNI respondents had lower measures on positive feelings about having good qualities and being able to do things as well as others.



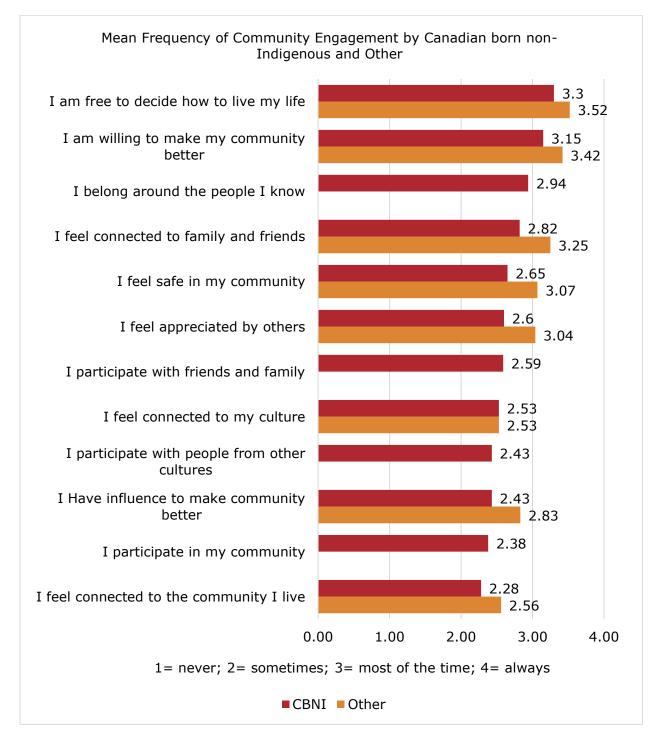
Trust for Service Providers

In four out of five areas there were no significant differences in trust. CBNI were less likely to trust government agencies, than their Other counterparts



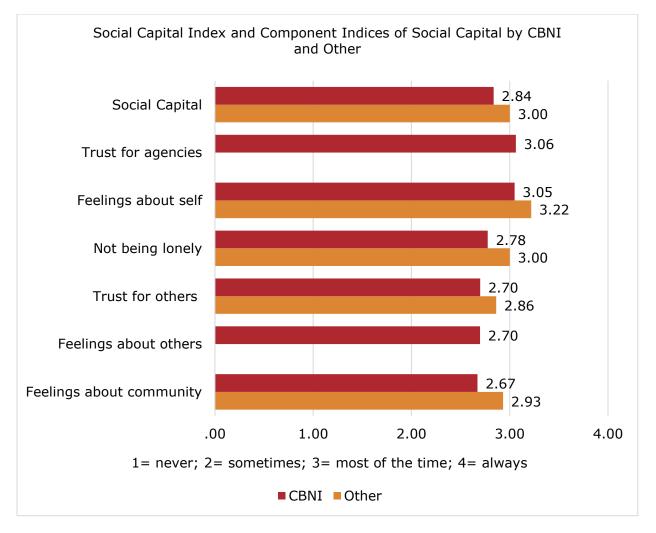
Community Engagement

On all but four measures CBNI respondents had lower average scores on measures of community engagement.



Social Capital Indices

A high score means high Social Capital. CBNI respondents (2.84) had a lower average Social Capital measure than their Other counterparts (3.00). With the exception of trust for agencies, all other component indices showed significant differences with CBNI respondents scoring lower than Other. The index component differences are discussed in the following section.



Causal Relationships

Only two of the independent variables had a significant effect on Social Capital, however, they accounted for 26% (adjusted r^2 =.255) of the change in Social Capital for the CBNI group.

Significant effects are those where, with 95% or more surety that the difference in Social Capital is not due to chance. Good health positively affects Social Capital while frequency of discrimination has a negative effect. For every measure of increase in health, Social Capital increases by 24% of one measure (b=.236; p=.000). For every measure of increase in the frequency of discrimination, Social Capital decreases by 8% (b=.083; p=.007).

	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	В	Std. Error	Beta		
(Constant)	2.178	.365		5.961	.000
Male=0; female=1	.036	.094	.038	.388	.699
Unattached=0; attached=1	062	.091	062	685	.495
Age	.001	.004	.041	.373	.710
Overall health: 1=poor to 4=very healthy	.236	.055	.387	4.272	.000
Highest level of education: 8 measures: none to advanced degree	.015	.034	.038	.427	.671
Employed: no=0 yes=1	.015	.107	.013	.141	.888
Currently attending school; no=0 yes=1	.016	.072	.024	.227	.821
Problem with substance in the last 12 months: no=0 yes=1	143	.095	139	-1.506	.135
Participate in spiritual/religious activities: 5 measures low to high	.051	.027	.177	1.907	.059
Ever homeless in Canada: no=0 yes=1	037	.102	035	359	.721
Frequency discrimination: 5 measures low to high	083	.030	259	-2.742	.007

Conclusions

In many areas the CBNI participants were the most marginalized. They were more likely to suffer from poor health or chronic illness or disability, and problematic substance use. They had fewer connections socially to family, friends, and agencies who could offer support. They struggled to meet their basic needs and had few resources to build a better life. The agencies that provided drop-in spaces, food, shelter, and community, were a lifeline to this group. Discrimination was strongly experienced and based on a wide range of factors. CBNI participants were also more likely to experience the multiple jeopardies of poor health, low education, displacement, and/or poverty.

7. Problematic Substance Use Subgroup

This chapter includes data relating to participants who indicated that they had a problem with substance use in the previous 12 months, and are referred to as the Problematic Substance Use Group (PSU) group. This group included 130 participants comprising 22% of all respondents. Within this group the majority (70%) were Indigenous, 26% were CBNI and 4% were immigrants. It is important to note that the PSU group is not exclusive. These participants may also be found in one the Ever Homeless or Poor Health subgroups.

In this chapter, those who have not experienced Problematic Substance Use are referred to as Other. Data for the Other group is presented only when the differences between the two groups are significant at the level of 95% or more surety that the differences found are not due to chance.

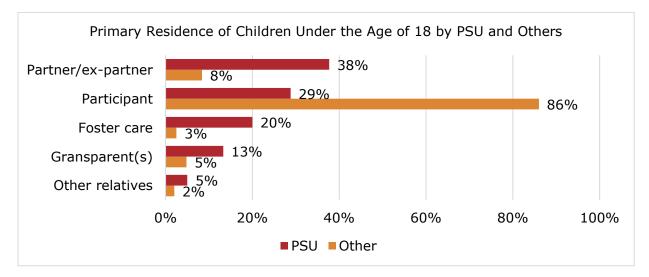
Likert Scale measures used in this survey include:

- Rarely or never, several times a year, monthly, 2-3 times a week, and daily
- Never, sometimes, most of the time, and always

Two focus group sessions were held at locations where all participants had problematic substance use in the past 12 months. The quotes in this chapter are the voices of these participants.

Demographics

Males (29%) were significantly more likely than females (18%) to be PSUs. On average PSUs are older than Other at 45 years compared with 40 years. PSUs lived in Edmonton longer with a mean of 23 years compared with 12 years for Other and have moved an average of 3 times in the past year compared with once for Other. There were no significant differences in the number of children under the age of 18 with 46% of PSUs falling into this category, but PSUs were far less likely to be living with their children at 29% compared with 86% for Other.

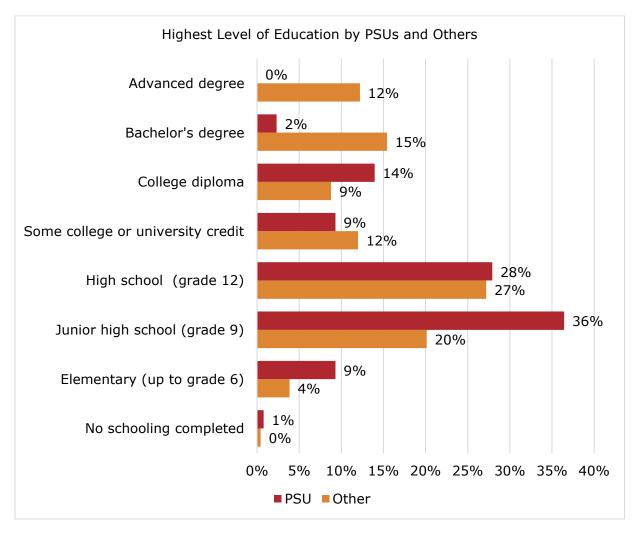


Employment & Income

Thirty-two percent (32%) of PSUs, compared with 55% of Other, were in the labour market at the time of interview. Three in four (76%) of the PSUs in the labour market were seeking employment while the other 24% worked either part-time, full-time, or casual hours, compared with 52% of the Other group seeking employment and 48% employed. PSUs reported substantially lower annual household incomes at a median of 11k compared with their Other counterparts at 20k.

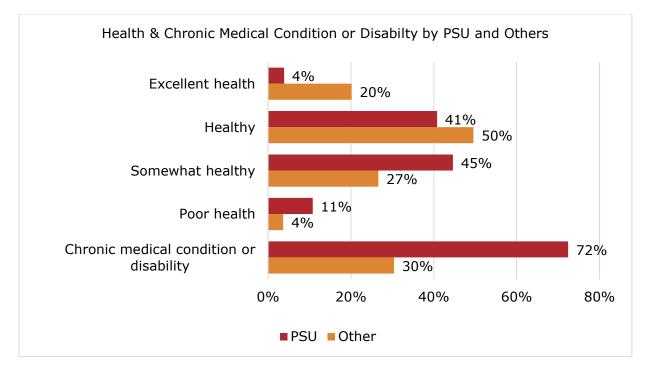
Education

A small proportion of PSUs (1 in 10) were attending school at the time of interview, compared with 4 in 10 for Other. Significant differences in the highest level of education were evident, where 46% of PSUs compared with 24% of Other had not completed high school. With regard to planning further education, there were no significant differences between groups.



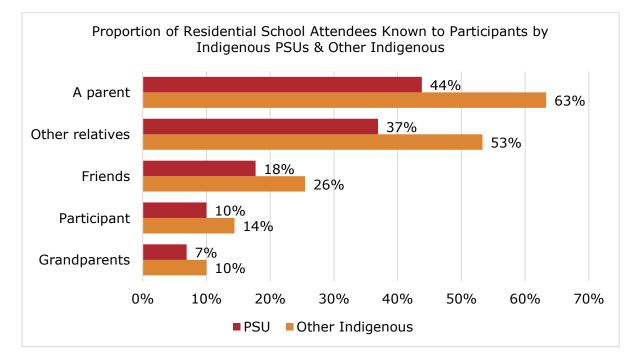
Health

A small majority of PSUs (56%) reported their health as either *poor* or *somewhat healthy*. Seventy-two percent (72%) reported having chronic medical conditions or disabilities.



Residential School

With a substantial majority of PSUs (70%) being Indigenous, information about residential schools is presented for this group.



Homelessness & Housing

Nine in ten PSUs were homeless at some point in their lives, compared with one in ten for Other, however 70% were housed at the time of interview.

Volunteerism

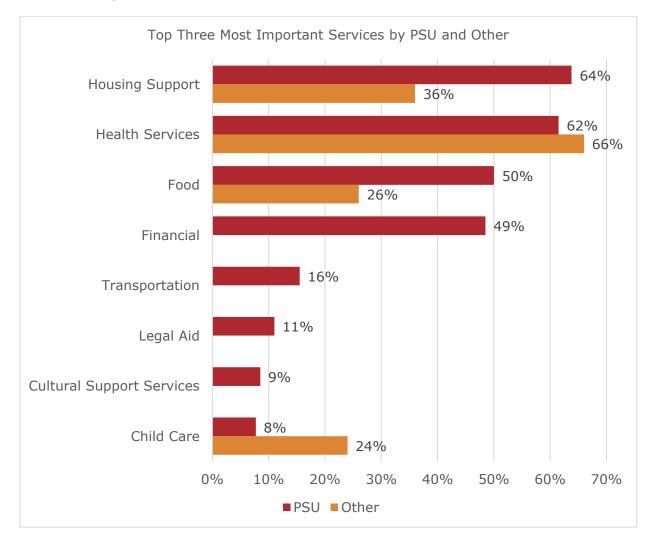
PSUs were less likely to volunteer at 45%, compared with 56% in the Other group.

Voting

There were no significant differences in voter participation at any level (municipal, provincial, federal).

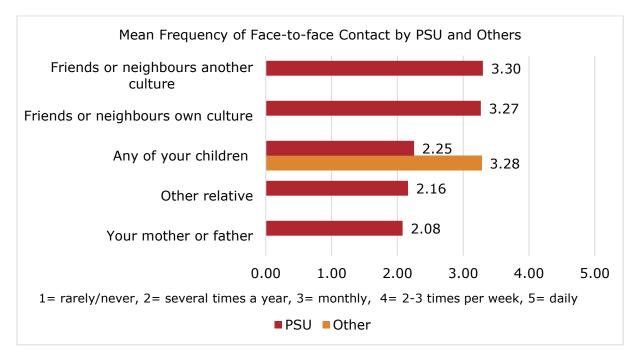
Most Important Services

Participants were asked to identify the three most important sources of help they received from agencies or government, either in the past year or at the time they needed service. PSU's greatest need was housing support, followed by health services and food support. There were significant differences between PSU and Other on four of the measures.

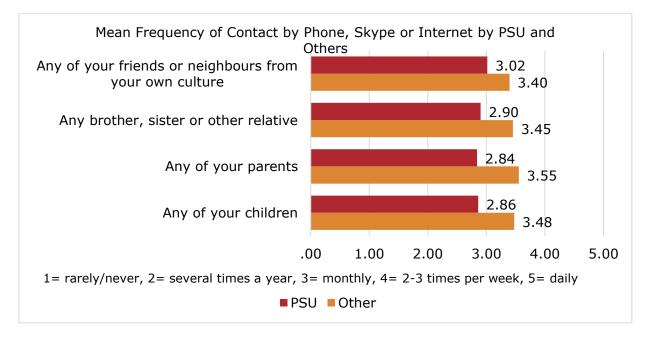


Contact with Others

Respondents were asked about the frequency of their contact with others; both face-to-face contact and remote (via phone, skype, internet, etc.). The only significant difference with regard to face-to-face contact is with ones' children, where PSUs were less likely to have contact.

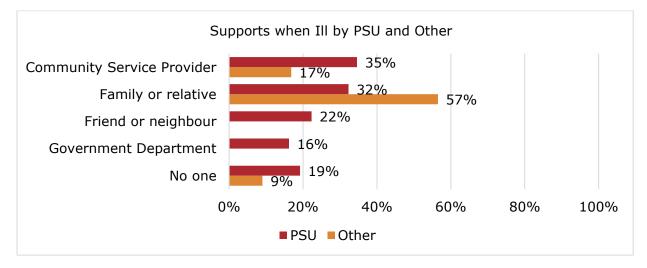


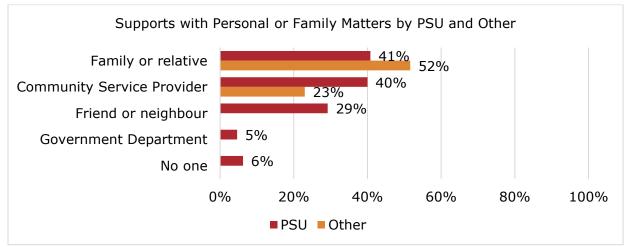
With regard to phone, skype or internet contact, PSUs had significantly less contact, regardless of with whom.

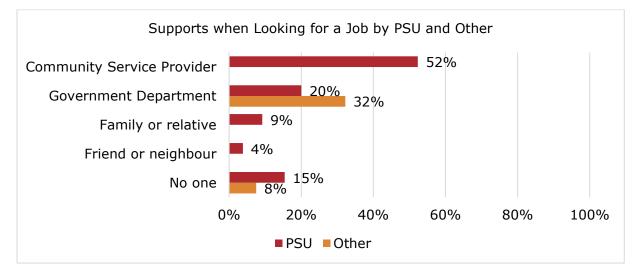


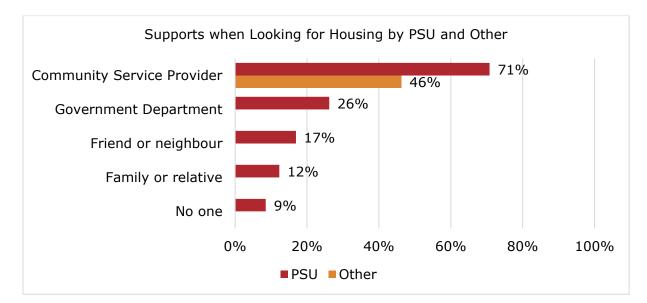
Support Systems

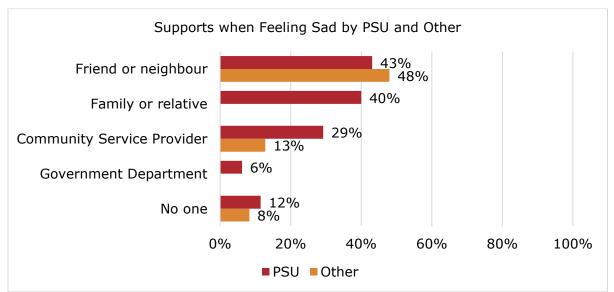
Participants were asked who they would call on if they needed support in a variety of situations such as looking for a job or dealing with a serious family matter. Participants were asked to select all the sources that applied to them.

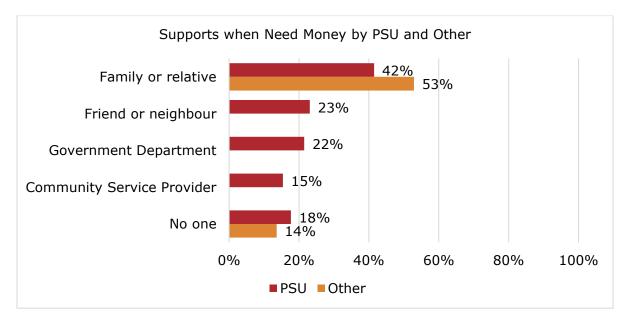












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Support was often found through others who were in similar situations.

Someone is going through a major change in your life and knowing other people it's almost like they're going through the same thing. It's nice to get to know people and watch them change for the better.

Respondents talked about their difficulties meeting basic needs.

I have a meeting with my housing people this week. It's up in the air what's going on. To proceed in life, without having a stable environment you can go to, it's hard to start making steps forward.

Now that the program has changes, I don't get subsidies anymore. Which leaves me \$500 less in a hole than I was before. I got one months' notice but even then it doesn't give me enough time to re-budget.

In order to move in any direction, you have to have a good home base. If you don't have that, you're literally under threat every few months.

When you're not financially stressed, that's one of the worst things that could happen. If you're looking at paying bills, rent, or food, and you don't have any money.

For me, housing is what matters. If I don't have a safe place to go to, nothing else matters. I can work on my recovery and work on my next steps.

Some respondents found it difficult to access services or difficult to navigate across services.

There's no control between all these outlets helping people. There's no communication done between them. Everybody is getting a different story from everywhere they go. Some are getting screwed because they don't know what to ask for. It all comes down to what the community can offer.

It's very hard to access it. It is not as easy as some people may think. But to find resources like counsellors and trauma counsellors it's not just open.

Another participant talked about the strength of family.

I am in a better position than a lot of people because I've got family. There are some avenues of life that you don't want to take to your family and what not. For me it's been a good support system.

Finally, participants talked about the support they feel from the agencies that help them. That positive support was built on trusting relationships.

I trust [agency name]. I've done the welfare thing its' like pulling your hair out and you don't know what's happening because its different people. I trust [agency name] way before I trust any government agency.

Talking about trust, I think when people follow, we have workers that would follow through. We feel brave enough to ask for help and not feel bad. If I hadn't been with [agency name] I don't know where I would have been housed. I knew nothing I had to deal with all this stuff on my own and when I came to [agency name] it began to feel like I was being helped.

Activities and Participation

With regard to religious participation, taking part in sports or physical activity, and participating in organized community activities, there were no significant differences between groups. PSUs were significantly less likely to use the internet at a mean of 3.47 compared with 4.48 for their Other counterparts.

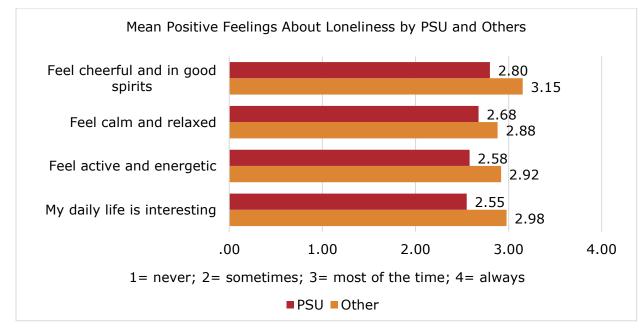
Use of Edmonton Public Library Resources

Only one significant difference was found with library usage where 37% of PSUs used the library to borrow books, DVDs or other materials compared with 54% of their Other counterparts.

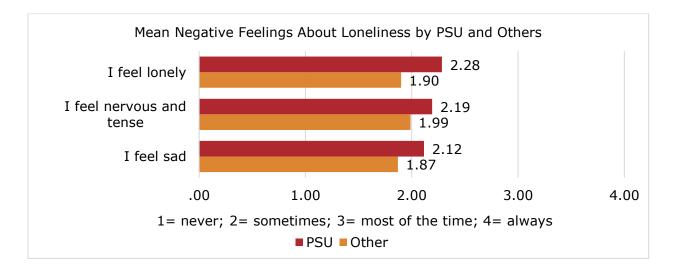
Discrimination

Discrimination was described to respondents as *unjust treatment because of race, age, economic situation, or gender.* PSUs (76%) were significantly more likely to report that they had experienced discrimination than Other (57%). They also experienced discrimination more frequently with 54% being subjected to discrimination on a monthly or more basis, compared with 30% of Other.

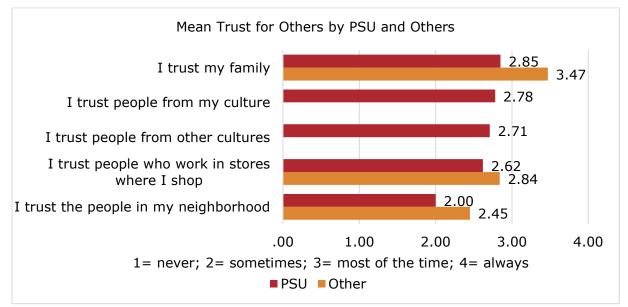
Social Capital Components



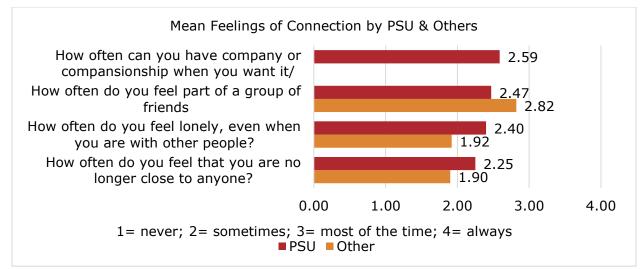
Loneliness



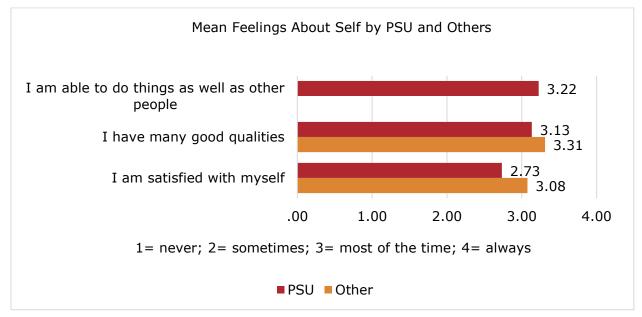
Trust for Others



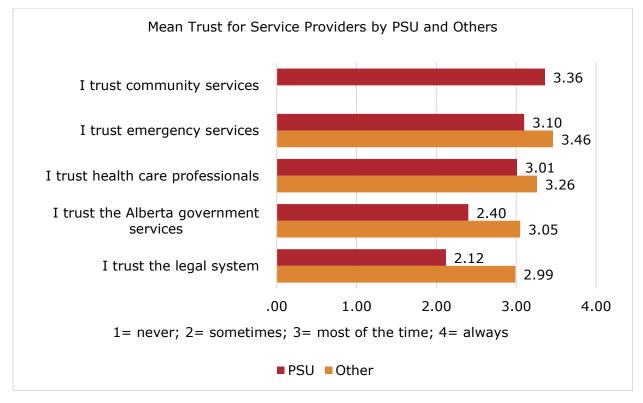
Feelings of Connection to Others



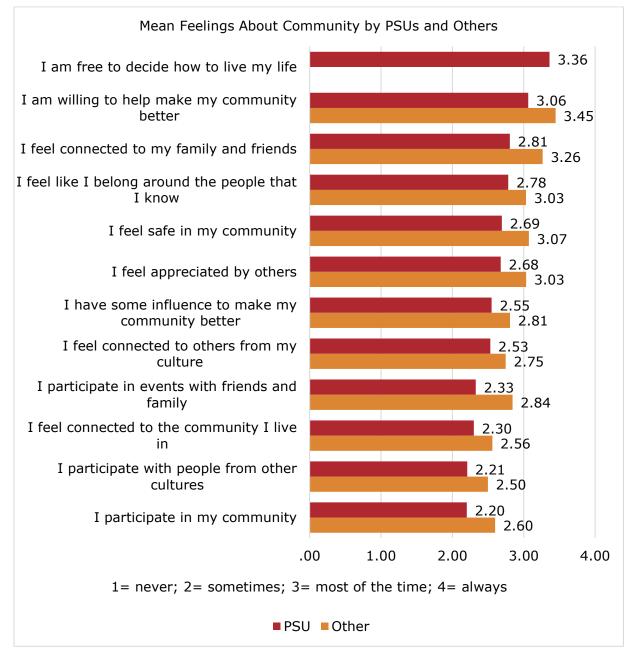
Feelings about Self



Trust for Service Providers

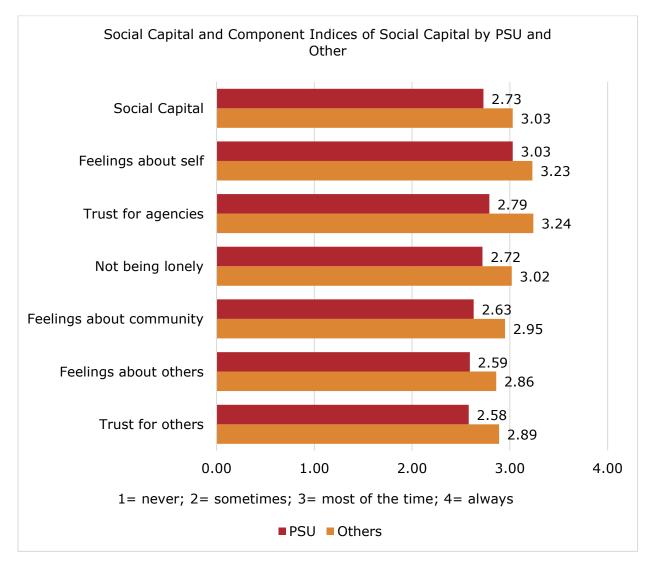


Community Engagement



Social Capital Indices

The Social Capital Index ranged from 1 to 4. A high score means high Social Capital. PSU respondents had a lower average Social Capital score than their Other counterparts at 2.73 compared with 3.03.



Causal Relationships

Four of the independent variables had a significant effect on Social Capital, and account for 13% of the change in Social Capital (adjusted $r^2 = .132$).

Two factors significantly affect Social Capital for those with problematic substance use. Good health is a positive factor and the frequency of experiencing discrimination is a negative factor. For every measure of increase in health, Social Capital increased by 14% (b=.141; p=.009). For every measure in increased frequency of discrimination, Social Capital decreases by 7% (b=-.069; p=.004).

	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	В	Std. Error	Beta		
(Constant)	2.046	.322		6.359	.000
Male=0; female=1	.008	.077	.009	.103	.918
Unattached=0; attached=1	103	.075	118	-1.363	.176
Age	.004	.004	.089	.909	.365
Overall health: 1=poor to 4=very healthy	.141	.053	.238	2.663	.009
Highest level of education: 8 measures: none to advanced degree	.016	.029	.047	.530	.597
Employed: no=0 yes=1	079	.139	049	572	.569
Currently attending school; no=0 yes=1	.081	.067	.111	1.204	.231
Ever homeless in Canada: no=0 yes=1	.109	.125	.079	.868	.387
Participate in spiritual/religious activities: 5 measures low to high	.046	.024	.176	1.867	.064
Frequency discrimination: 5 measures low to high	069	.023	260	-2.949	.004

8. Ever Homeless Subgroup

This chapter shows significant differences between participants who have at some point in their lives been homeless in Canada, and are referred to as the Ever Homeless group. It does not account for immigrants who were homeless in their countries of origin, or for those born in Canada who may have experienced homelessness abroad. The group presented in this section comprises 265 participants or 45% of all participants. Within this group the majority (56%) of respondents were Indigenous, 31% were CBNI, and 12% were immigrant.

It is important to note that the Ever Homeless group is not exclusive. These participants may also be found in the Problematic Substance Use or Poor Health subgroups. Those who are not in the *Ever Homeless* group are named *Never Homeless* in this chapter.

Four survey questions addressed homelessness: ever homeless, whether or not currently housed, number of times homeless in the past five years, and total amount of time homeless in the past five years. Homelessness was defined as having no housing or precarious housing such as couch surfing, or staying in a shelter. The Ever Homeless measure was selected as the breakdown for this chapter because analysis of the data showed that ever being homeless had as profound an impact on Social Capital as did present homelessness. Forty-five (45%) (n=268) of respondents either were or had been homeless in Canada at some time in their lives.

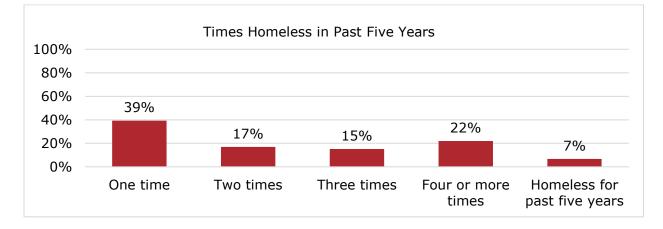
Data for those who have never been homeless in Canada will be shown only when the differences between the two groups are significant at the level of 95% or more surety that the differences found are not due to chance.

Likert Scale measures used in this survey included:

- *Rarely or never, several times a year, monthly, 2-3 times a week, and daily*
- Never, sometimes, most of the time, and always

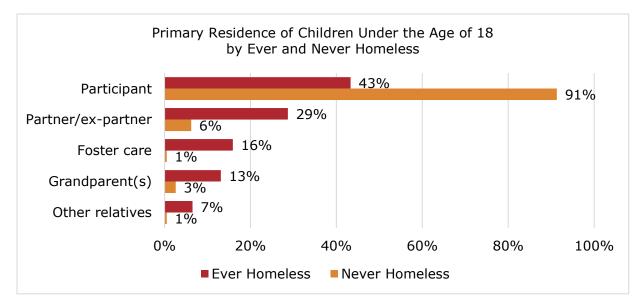
Demographics

For the Ever Homeless participants 75% had permanent housing at the time of interview. The average duration of homelessness during the past five years was between 6 months and one year. Seven percent (7%) of those who had been homeless were homeless for the entire 5 year period. The number of times homeless in the five years prior is shown below.



The Ever Homeless group was 46% female and 54% male. Forty-three percent (43%) of ever homeless were in attached relationships compared with 65% of those who had never been homeless. A minority of Ever Homeless had children under the age of 18 (35%) compared with 65% for the Never Homeless.

The Ever Homeless have lived in Edmonton for an average of 21 years and have moved an average of 1.6 times in the last 12 months. The Never Homeless have lived in Edmonton for an average of 10 years and have moved an average of once in the past 12 months.

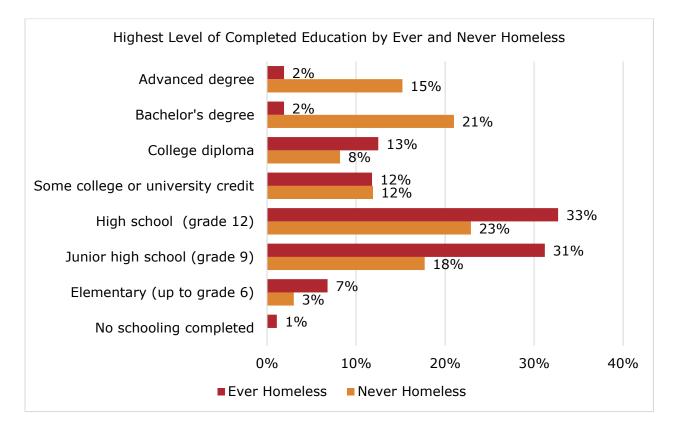


Employment & Income

While a majority (61%) of Ever Homeless respondents were not in the labour market, that proportion was 39% for the Never Homeless. For those in the labour market, 63% of the Ever Homeless were seeking employment, compared with 51% of the Never Homeless. The median household annual income for the Ever Homeless was 14k compared with 25k for the Never Homeless.

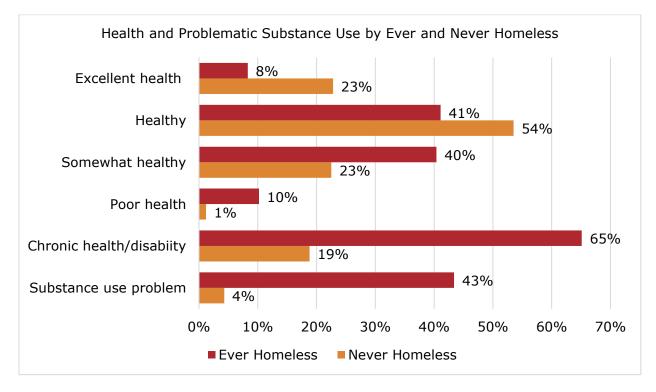
Education

Ever homeless participants were far less likely to be attending school at the time of interview at 12% compared with 53% for the Never Homeless. Highest level of education achieved was also lower for Ever Homeless. Eighty one percent (81%) of the Ever Homeless were not planning further education compared with Never Homeless at 61%.



Health and Problematic Substance Use

Participants were asked to rate their overall health using a scale of 1 to 4 where 1 means *poor health* and 4 means *excellent health*. They were also asked if they had a chronic health issue or disability, and if they had a substance use problem in the past 12 months.



Volunteerism

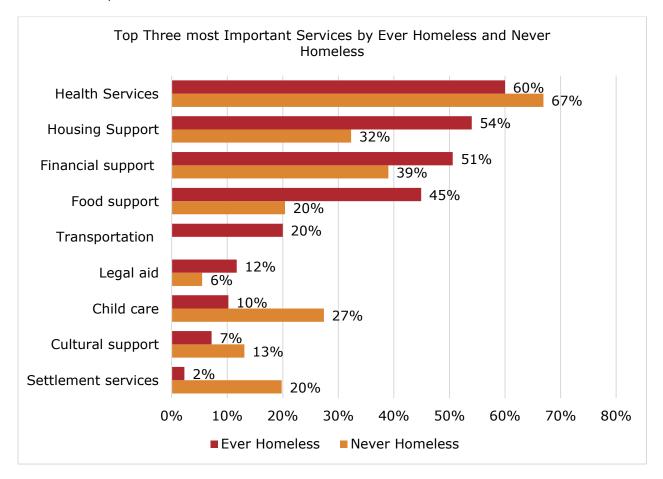
There were no significant differences in volunteering between the ever and the Never Homeless.

Voting

There were no significant differences in the proportion of voters at any level (municipal, provincial, federal).

Most Important Services

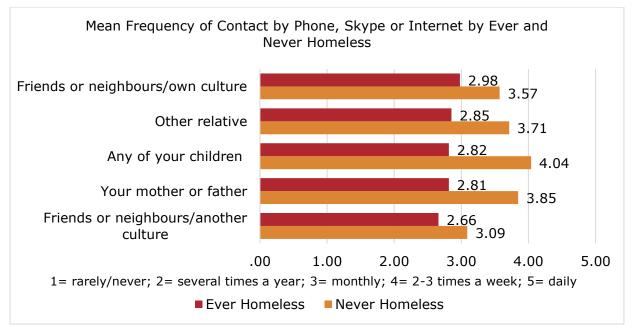
Participants were asked to think about the three most important sources of help that they received from agencies or government, either in the past year or at the time they needed services. On all but one measure there were significant differences between Ever and Never Homeless respondents.



Contact with Others

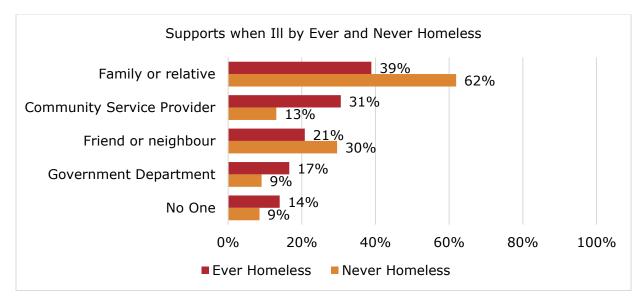
Respondents were asked about the frequency of their contact with others; both face-to-face contact and remote (via phone, skype, internet, etc.). Contact with others was measured on a scale of 1 to 5 where 1 means *rarely or never*, 2 means *several times a year*, 3 means *monthly*, 4 means *2-3 times a week*, and 5 means *daily*. Significant differences are found with three measures for face-to-face contact and on all measures for remote contact.

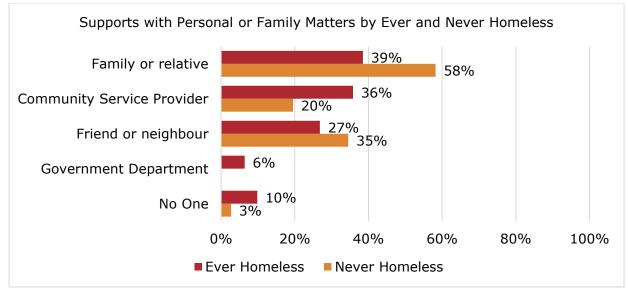


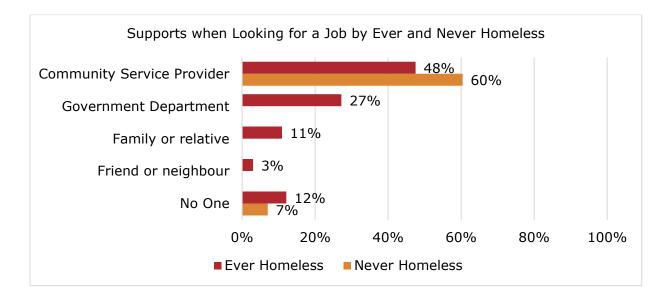


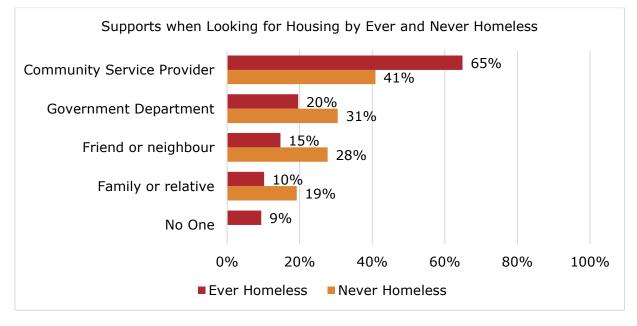
Support Systems

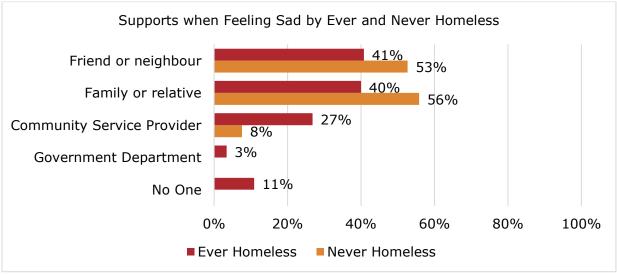
Participants were asked who they would call on if they needed support in a variety of situations. Participants were asked to select all the sources that applied to them.

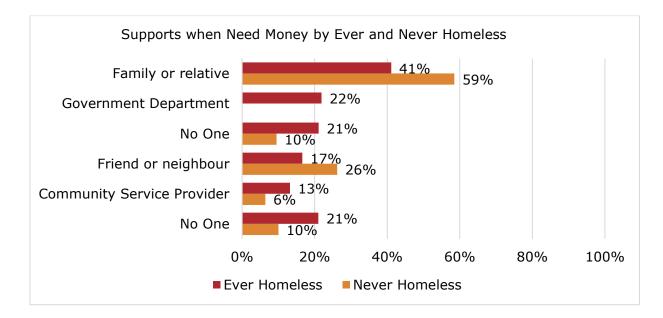






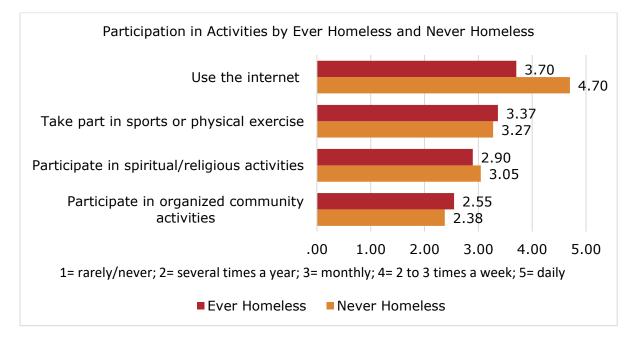






Activities & Participation

Respondents were asked about the frequency of their participation in a variety of activities using a scale of 1 to 5 where 1 means *rarely or never*, 2 means *several times a year*, 3 means *monthly*, 4 means *2-3 times a week*, and 5 means *daily*.



Use of Edmonton Public Library Resources

Participants were asked about their usage of EPL services. There were no significant differences between groups for the EPL data.

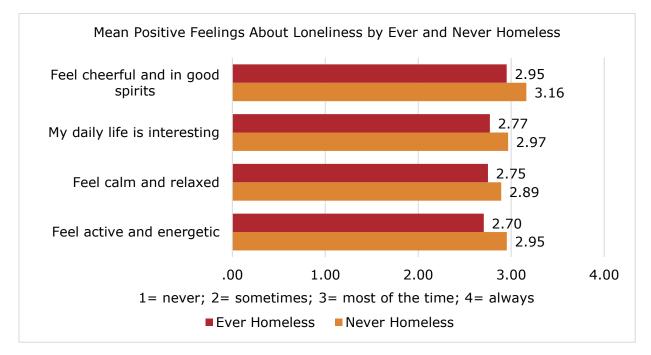
Discrimination

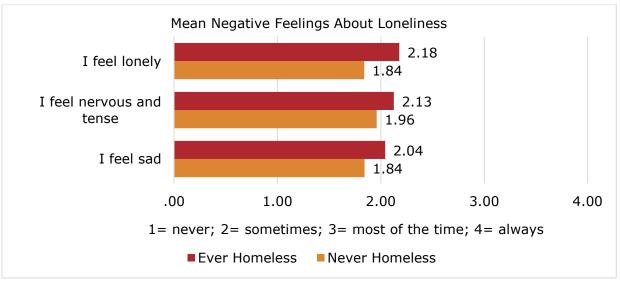
Discrimination was described to respondents as *unjust treatment because of race, age, economic situation, or gender.* The Ever Homeless were more likely to have experienced discrimination at 74% compared with 51% for the Never Homeless. They also experienced discrimination more frequently with a mean of 2.69 compared with 2.09 for the Never Homeless which means they experience discrimination between *several times a year* and *monthly*.

Social Capital Components

Loneliness

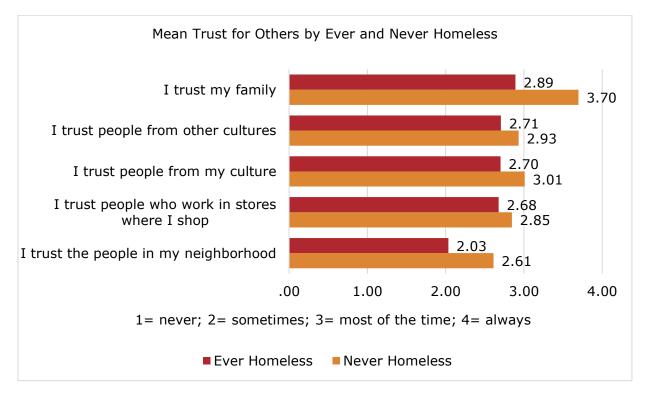
The Ever Homeless subgroup had significantly lower mean scores on the positive feelings about the statements indicating lack of loneliness and significantly higher on feelings of loneliness.





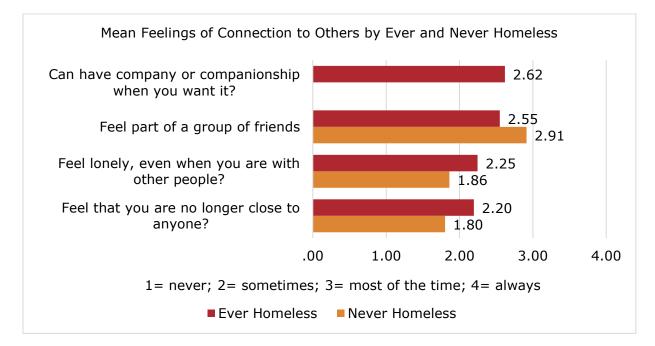
Trust for Others

The Ever Homeless group had significantly lower trust for others than those who had never been homeless.



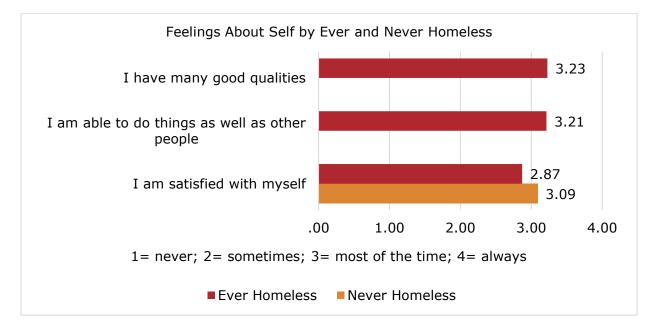
Feelings of Connection to Others

On one measure of connection there was no significant difference. On the remaining three measures the Ever Homeles had lower feelings of connection.



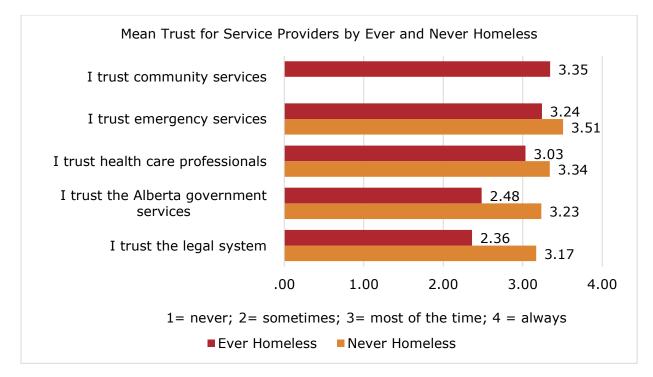
Feelings about Self

Significant differences with regard to feelings about self were found on only one measure where the Every Homeless were less likely to feel satisfied with self.



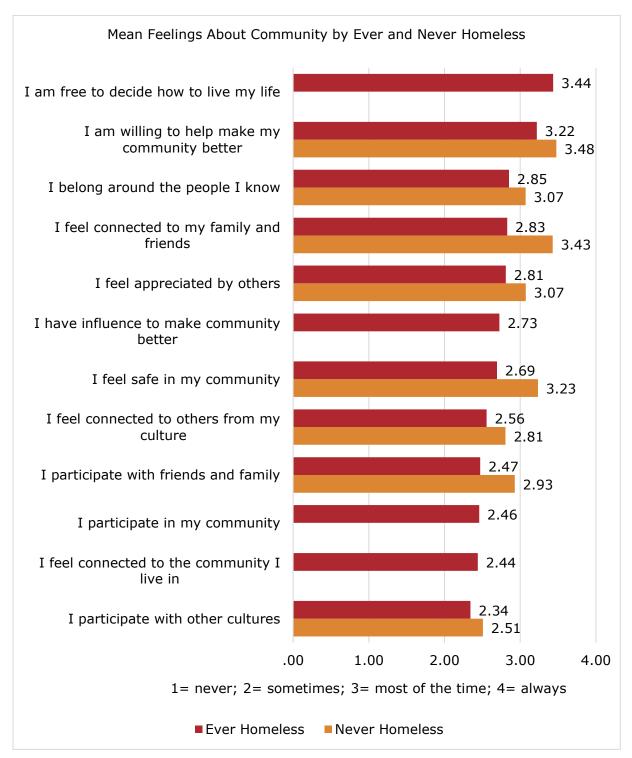
Trust for Service Providers

The Ever and Never Homeless did not differ with regard to trust for community services. For the remaining four types of services the Ever Homeless had significantly lower levels of trust.



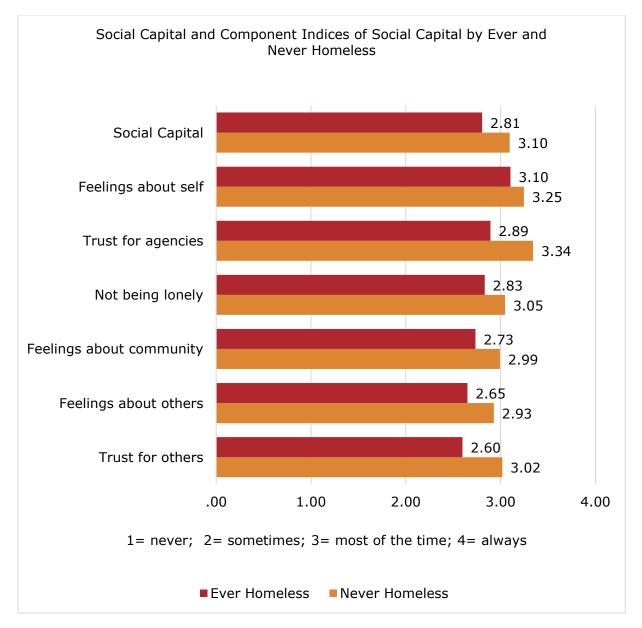
Community Engagement

On four measures pertaining to community engagement there were no significant differences between groups. On all other measures, the Ever Homeless scored significantly lower.



Social Capital Indices

Ever homeless respondents had a lower average Social Capital score than their Never Homeless counterparts at 2.81 compared with 3.10.



Causal Relationships

This analysis explains 19% of the change in Social Capital (adjusted r^2 =.190). Significant effects were found on three measures.

Within the Ever Homeless group being healthy, and participation in spiritual or religious activities, improves Social Capital. For every measure of increase in health, Social Capital increases by 11% of one measure (b=.113; p=.001). For every measure of increase in participation in spiritual or religious activities, Social Capital increases by 5% of one measure (b=.050; p=.005).

The frequency of experiencing discrimination decreases Social Capital. For every measure of increase in the frequency of discrimination, Social Capital decreases by 10% of one measure (b=-.097; p=.000).

	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	В	Std. Error	Beta		
(Constant)	2.742	.209		13.126	.000
Male=0; female=1	045	.055	050	823	.411
Unattached=0; attached=1	031	.054	034	573	.567
Age	002	.003	045	688	.492
Overall health: 1=poor to 4=very healthy	.113	.035	.198	3.246	.001
Highest level of education: 8 measures: none to advanced degree	.000	.020	001	022	.983
Employed: no=0 yes=1	.054	.076	.042	.717	.474
Currently attending school; no=0 yes=1	031	.045	042	694	.488
Substance Use Problem	073	.053	081	-1.375	.170
Participate in spiritual/religious activities: 5 measures low to high	.050	.018	.182	2.857	.005
Frequency discrimination: 5 measures low to high	097	.017	356	-5.869	.000

9. Poor Health Subgroup

This chapter discusses participant health. Participants were asked to rate their overall health using a Likert scale of one to four where 1 means *poor health*, 2 means *somewhat healthy*, 3 means *healthy*, and 4 means *excellent health*. This health variable was recoded to include two variables with values 1 and 2 considered *poor health*, and measures 3 and 4 considered *good health*. The group under study in this section includes 36% or 214 respondents who were in the *poor health* category.

Within this group half were Indigenous, and the remainder were evenly divided between immigrant and CBNI participants. The poor health group is not exclusive and these participants may also be found in the Problematic Substance Use or Ever Homeless subgroups.

This chapter is meant to be an addition to the earlier chapters and includes poor health only. Please read the larger report for the methodology and general findings, explanations and references. Focus group data is not included in this chapter as participants with poor health were not identified in those discussions.

Poor health participants will only be compared with those with good health named *Good Health* in this chapter, when the differences between the two groups are significant at the level of 95% or more surety that the differences found are not due to chance.

Likert Scale measures used in this survey include:

- *Rarely or never, several times a year, monthly, 2-3 times a week, and daily*
- Never, sometimes, most of the time, and always

Demographics

A majority (73%) of Poor Health respondents were unattached, compared with 57% of those in Good Health. A lower proportion of those with Poor Health had children under the age of 18 at 43% vs 57% for those in Good Health. Those in Poor Health lived in Edmonton longer at a mean of 19 years compared with 12 years for those in Good Health. They are also older, at a mean age of 45 years compared with 39 years for those in Good Health.

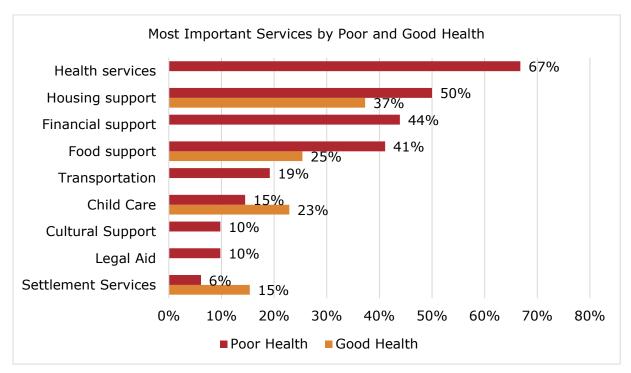
Those in Poor Health were more likely to report having a problem with substance use in the past 12 months at 34% compared with 15% for the Good Health group. They were also more likely to report having a chronic medical condition or disability at 70% compared with 23% for those in Good Health.

Housing and Homelessness

The Poor Health group had a higher proportion of participants who had ever been homeless in Canada at 64%, compared with 35% for those in Good Health, however, there were no significant differences in current housing status. There were also no significant differences with regard to number of times homeless in their lives or the length of homelessness in the past five years.

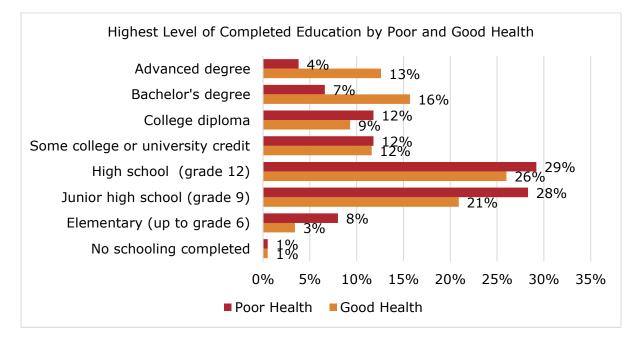
Most Important Services

Participants were asked to think about the three most important sources of help that they received from agencies or government, either in the past year or at the time they needed help. On four of the nine measures there were significant differences between respondents with Poor Health and Good Health.



Education

Participants with Poor Health were less likely to be attending school at 23% compared with 59% for those in Good Health, however, there were no differences when it came to aspirations about returning to school. Those with Poor Health had less education with 37% who did not complete high school, compared with the Good Health group at 26%.



Employment and Income

Procuring employment is difficult for many marginalized people. No significant differences were found between the Poor and Good Health groups with regard to employment or income.

Volunteerism

There were no significant differences between Poor and Good Health groups with regard to volunteerism.

Voting

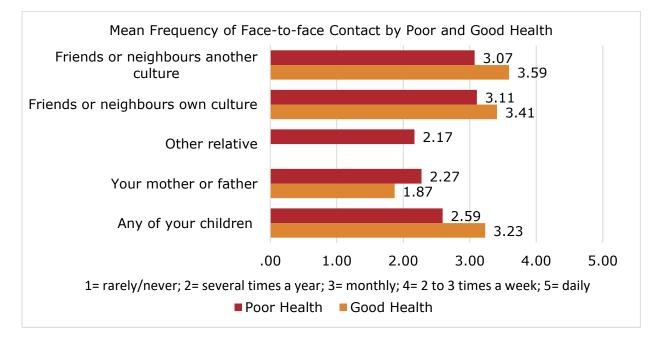
There were no significant differences in voter participation at any level (municipal, provincial, federal) between the Poor and Good Health groups.

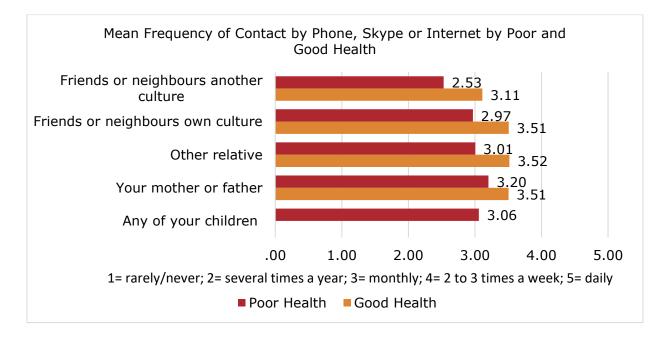
Use of Edmonton Public Library

There were no measures with significant differences with regard to use of services at the EPL between the Poor and Good Health groups.

Contact with Others

Respondents were asked about the frequency of their contact with others; both face-to-face contact and remote (via phone, skype, internet, etc.).

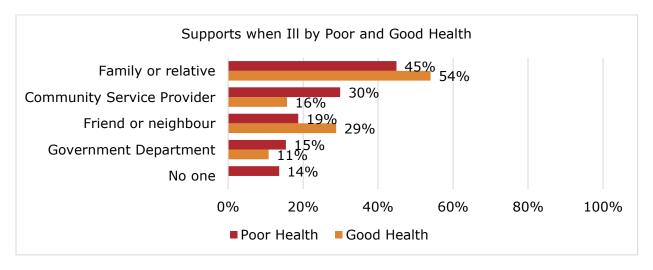


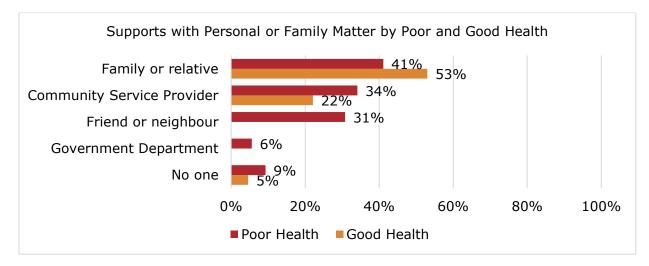


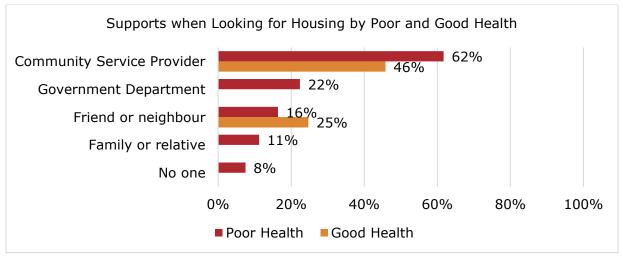
Support Systems

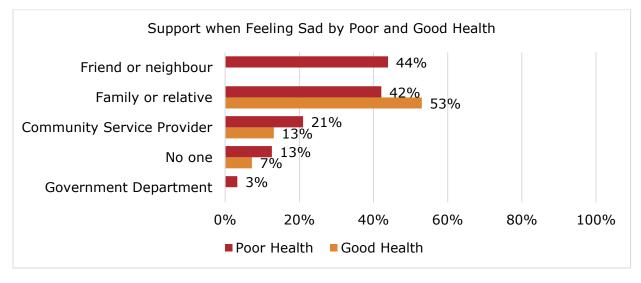
Sometimes we are in a situation where we need support. Participants were asked who they would call on if they needed support in a variety of situations. Participants were asked to select all sources that applied to them.

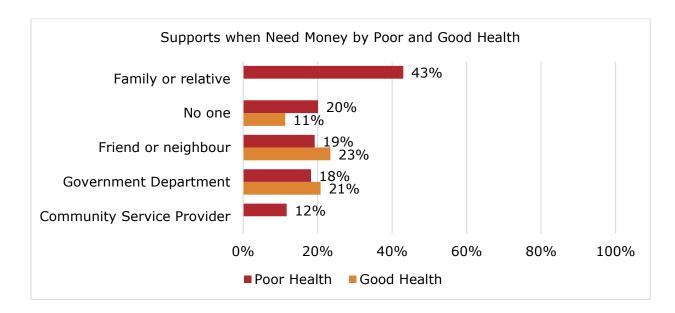
There were no significant differences between groups for supports when looking for a job.





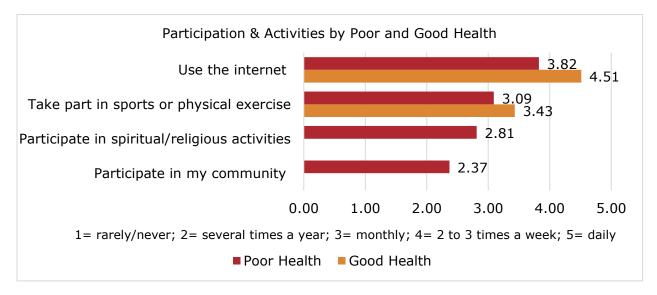






Activities and Participation

Significant differences were found on two measures where participants with Poor Health were less likely to use the internet or take part in sports or physical exercise.



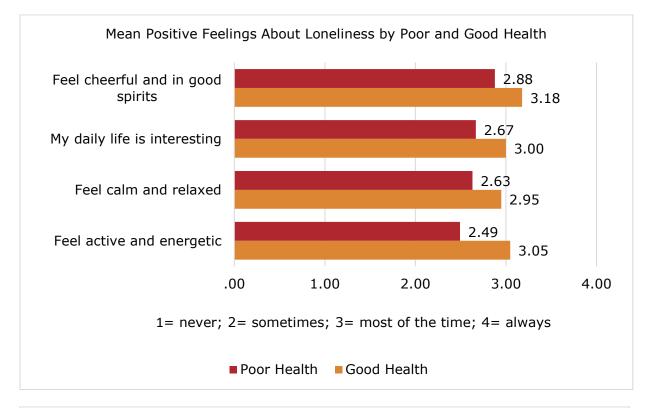
Discrimination

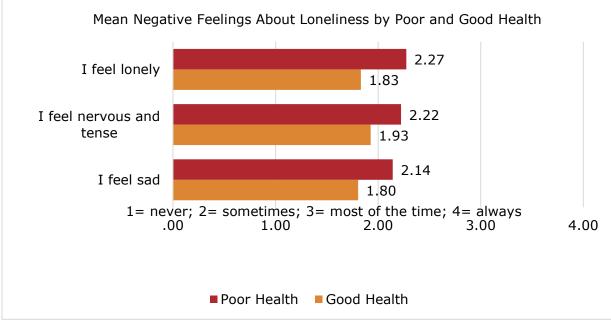
Discrimination was described to respondents as *unjust treatment because of race, age, economic situation, or gender.* Poor Health participants were more likely to experience discrimination (73%) than their Good Health counterparts at 55%. They also experienced discrimination more frequently at a mean of 2.63 compared with 2.27 for those with good health (between several times a year and monthly).

Components of Social Capital

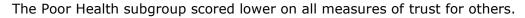
Loneliness

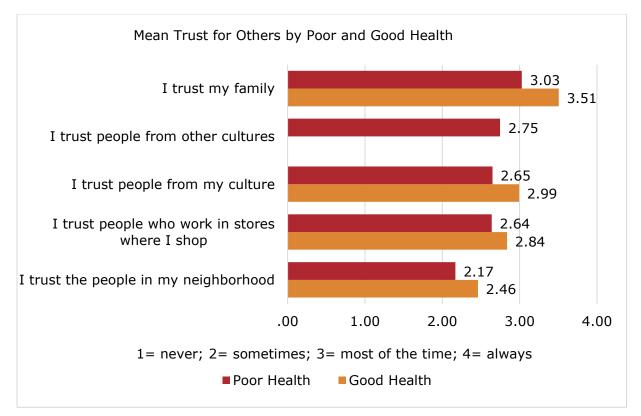
Significant differences were found on all measures. The Poor Health group scored lower on positive feelings protecting one from loneliness and lower on negative feelings about loneliness.





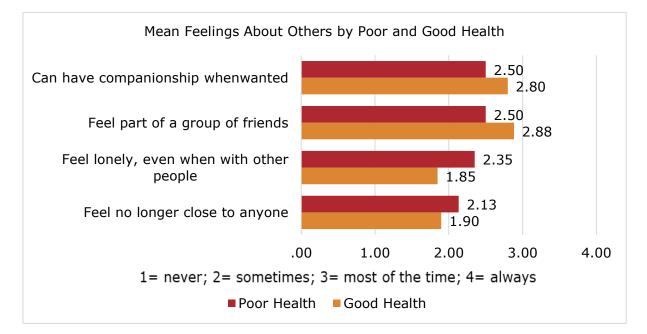
Trust for Others



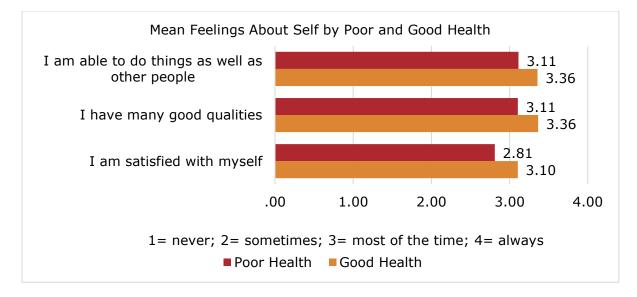


Feelings of Connection to Others

On all measures Poor Health respondents were less likely to feel connected to others.



Feelings about Self



On all measures the Poor Health group had less positive feelings about self.

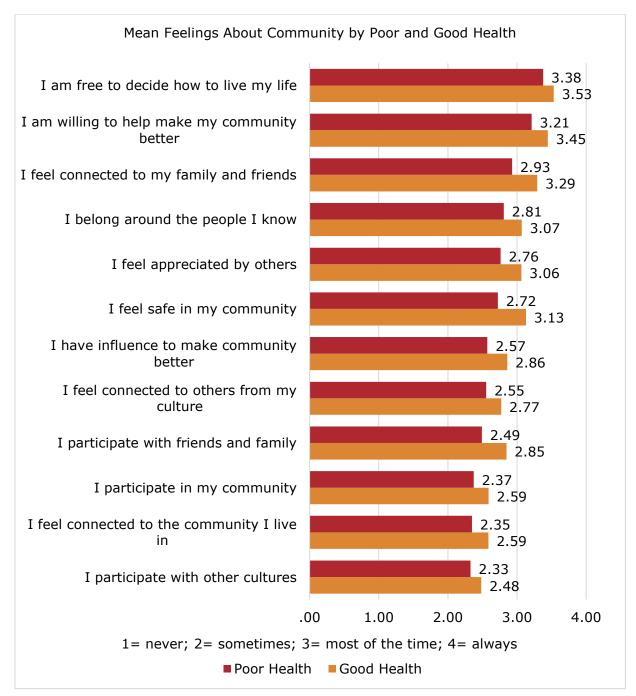
Trust for Service Providers

Mean Trust for Service Providers by Poor and Good Health 3.35 I trust community services 3.21 I trust emergency services 3.47 3.14 I trust health care professionals I trust the Alberta government 2.59 services 3.07 2.43 I trust the legal system 2.99 .00 1.00 2.00 3.00 4.00 1= never; 2= sometimes; 3= most of the time; 4= always Poor Health Good Health

While there were no significant differences in trust for health care professionals, the Poor Health group had significantly lower levels of trust for the other types of service providers.

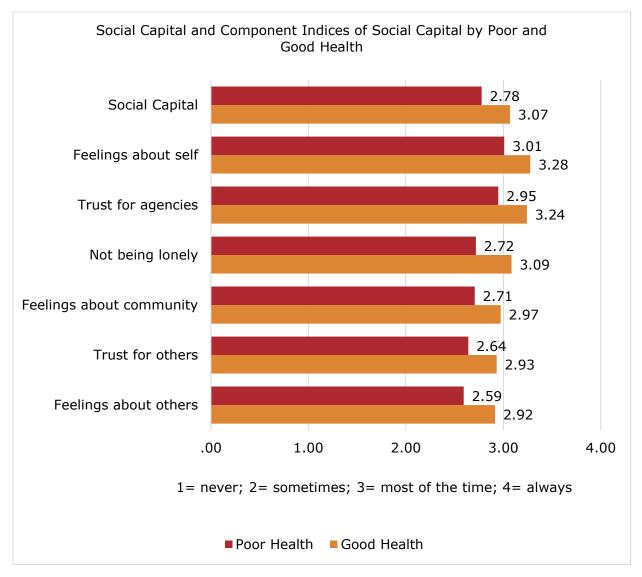
Community Engagement

On all measures Poor Health participants scored significantly lower on feelings of connection to the community.



Social Capital Indices

Poor health respondents had a lower average Social Capital score than their healthy counterparts at 2.78 compared with 3.07.



Causal Relationships

Within the poor health group of participants, two factors had significant effects on Social Capital. Participating in spiritual or religious activities increases Social Capital, and experiencing discrimination decreases Social Capital. This regression explains 16% of the change in Social Capital (r^2 =.161).

Significant effects are those where, with 95% or more surety that the difference in Social Capital is not due to chance. Two variables had significant on Social Capital. For every increase in the frequency of participation in religious or spiritual activities, Social Capital increased by 7% (b=.067; p=.001). For every measure of increase in the frequency of discrimination, Social Capital decreased by 8% (b=-.084; p=.000).

	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	В	Std. Error	Beta		
(Constant)	2.857	.205		13.941	.000
Male=0; female=1	078	.066	086	-1.180	.239
Unattached=0; attached=1	066	.061	075	-1.079	.282
Age	001	.003	031	403	.688
Substance Use Problem 0=no 1=yes	111	.069	119	-1.624	.106
Highest level of education: 8 measures: none to advanced degree	.026	.021	.091	1.246	.214
Employed dichotomous	075	.088	061	855	.394
Employed: no=0 yes=1	008	.045	014	180	.857
Currently attending school; no=0 yes=1	067	.079	073	849	.397
Participate in spiritual/religious activities: 5 measures low to high	.067	.020	.237	3.376	.001
Frequency discrimination: 5 measures low to high	084	.019	305	-4.390	.000

10. What We Learned

Involve the Community from beginning to end

From the ground up the Better Life project was built by community. Researchers drew on their awareness of and grounding in the community to form their initial research ideas then consulted with community to inform their funding application. They realized the need for strong community guidance to develop a research project that was viable and useful.

At the incubation phase of the Better Life project, when the idea was being developed and prior to applying for funding, the researchers visited service providers at their places of business to discuss and formulate a proposal. They initially visited agencies they had a relationship with and then followed up on recommendations for other potential collaborators. The advice and insight from the community was instrumental in the development of a sound research proposal. Being included at this point in the project community that it was truly their research project. Throughout the project community collaborators were a source of wisdom, learning, and guidance. This type of research is most relevant and useful when the community is involved from beginning to end.

Choose a known and trusted research partner

The Edmonton Public Library (EPL) is a trusted entity that provides spaces where people can spend time and be inside during the day without having to spend money. As a result, many individuals at a variety of EPL branches use the library as a place to meet, relax, or to stay warm in winter. Since 2011, EPL has hired social workers and partnered with several community agencies to provide social services to library patrons in need. This innovative work grounded EPL in the community and positions them as a leader. In 2014 EPL was the first library in Canada to receive the prestigious *Library of the Year Award* from the Gengage Learning and Library Journal, for community service, creativity, leadership and innovation in developing community programs.

The EPL was a logical choice as a research partner for the Better Life Project because of their place in the community and their established and trusted relationship with NorQuest College. Social Work students from NorQuest College have completed their practicums with EPL for many years.

People are resilient and generous

The majority of participants in this study were resilient and resourceful, important qualities when living a marginalized life. Despite difficult circumstances and numerous challenges, most felt they had autonomy and hope for a better future. They wanted to give back to their community and share and care for others, even when they had limited or no resources. Many people, who struggled, were particularly empathetic and wanted to help others who were also facing challenges. This help could be as basic as using a garbage bag to cover someone who was sleeping on the street in the rain, or risking ones' housing by sharing accommodation with a homeless friend.

For the homeless, resilience was shown by the ability to navigate and access the basics of safe shelter and food. It was also about building relationships with agencies that offer support, finding people to trust, and earning the trust of others. Finally, it was the hope that a better life was possible that helped many of the homeless continue with their daily lives. For those who do not equate a better life with being housed, a better life was often framed to mean companionship or community.

For Indigenous participants resilience was often attributed to a return to Indigenous wisdom and spirituality. Resilience is born out of survival from the genocide against Indigenous people in Canada. Indigenous participants talked about their daily challenges of systemic and specific discrimination that were barriers to building a better life. Many described their resilience and determination to move forward as intentional, as they were motivated to serve as role models for future generations. A source of strength for many was to understand that the discrimination they experienced had nothing to do with them personally, but rather a reflection of a lack of understanding, compassion, or kindness, in their perpetrator.

For immigrant participants, and most especially newcomers, resilience was demonstrated by success in navigating the settlement process and adjusting to, and finding opportunities in their new country. Immigrants struggled to make new friends, to have their credentials and experience recognized and valued, to attain Canadian job experience, and to learn how to network. Their hope for the future helped them to face and transcend barriers, or learn to work within barriers when change was not attainable.

Being homeless at any time makes a difference

We learned that homelessness at any point in ones' life had a negative impact on trust and well-being. CBNI participants were most likely to have been homeless and to have experienced problematic substance use in the past 12 months. Their proportions were followed closely by Indigenous respondents. The double-jeopardy of being homeless and having problematic substance use reduced ones' Social Capital.

The proportion of immigrant respondents who reported ever being homeless in Canada was low, but it is important to remember that this is partly because they have not lived in Canada for their whole lives. This study does not take into account homelessness in countries outside of Canada, however, immigrants who were formerly refugees would all have experienced displacement and loss of home. Immigrant respondents also discussed offering places in their homes to fellow immigrants in need, which likely reduced the rate of homelessness reported.

Relationships are key

As personal problems become more complex resources may remain constant. Meeting the needs of the marginalized falls on the shoulders of frontline workers. One of the ways to address this pressure is a shift towards offering support over the phone and providing resource lists for individuals seeking help. Call centres offer 24 hour phone lines that provide access to a range of resources.

While referral services provided remotely have certain benefits, participants found that this *helping by phone numbers* model increased their isolation because they lost face-to-face contact. They also saw this system as a structure that limited their access to supports and resources. At times this barrier led them to give up on seeking help.

When front line workers are able to provide consistent, face-to-face support, trust and acceptance are built. Relationships are carried on to the greater community as front-line workers help clients navigate the process of referrals. While acknowledging some of the benefits of having phone help available, participants voiced a strong preference for ongoing, consistent face-to-face contact. At best, face-to-face services provide three important attributes to the client-service provider relationship: empathy, a non-judgmental understanding of a person's experience; and genuineness, by being trustworthy and honest and to do no harm. (Hick, 2017).

Drop-in programs are integral to addressing urgent basic needs. They offer a point of first contact and may often be the first step in procuring support, however, when it comes to addressing higher level needs, longer term programs are seen as vital. Participants talked about the value of specific programs where people with like needs worked together to build their own capacity and strength. They described how their relationship with staff was often the link required for them to commit to a program long enough to see the benefit for themselves, and subsequently be intrinsically motivated to participate.

At a societal level, one of the reasons that face-to-face contact is becoming less frequent is the emerging trend of social connectedness using remote access such as cell phones and social media. Chan's (2015) research on connectedness and the use of cell phones found that family bonds can be strengthened through the use of cell phones, particularly for those whose families are far way, or who do not have the resources to travel to see them. Conversely, using cell phones for non-communicative uses such as information seeking or passing time deters from connectedness.

Discrimination is common

The majority of participants reported experiencing discrimination. Discrimination was most highly reported by Indigenous respondents, and was also experienced most frequently by this group. Discrimination diminishes confidence and self-esteem, especially when it is experienced frequently and in multiple contexts. It also has long-term negative effects on trust, excludes people from community, and increases loneliness. Discrimination takes many forms and may be related to race or ethnicity, poverty, age, gender, sexual orientation, the number of children one has, or ability to speak an official language.

Discrimination with relation to housing was widely experienced. Indigenous and immigrant participants reported frequently being told that there was no vacancy when showing up at the door to see a dwelling, despite confirming their appointment shortly before arrival.

CBNI participants often framed discrimination around living in poverty. As with other groups, their ability or intelligence was often called into question.

Indigenous participants were most likely to mention a range of places where discrimination occurred, many of which included public spaces and transportation. Assumptions about their abilities and intelligence were often made. They were labelled as unworthy and were assumed to be abusers of substances. For female Indigenous participants who lived in poverty and had children, their triple jeopardy situation made discrimination frequent and widespread.

Immigrants were less likely to say they had experienced discrimination, but their experiences of it came through in their sharing in the focus group discussions. For very new immigrants to Canada, the experiences of discrimination may be masked by, or understood as being new to the country and not understanding Canadian culture. For others, most especially refugees, discrimination in Canada may be underestimated when weighed against former refugee-making experiences. Immigrants reported being told to *go back to their countries of origin*, to *quit taking jobs away from Canadians*, and were accused of *not trying to become part of Canada*.

There are many challenges

The majority of respondents live in poverty, under LICO. This condition means insecurity with regard to basics such as food, shelter, clothing, and health care. Participants talked about having to prioritize which basic needs would be met, knowing that all were not possible. Other challenges included lack of education, poor health and chronic health

problems or disability, histories of trauma, or problematic substance use. While substance use may help to manage or cope with difficulty and the stress of living with so many challenges, it often leads to a more difficult life.

Indigenous participants' challenges were framed around the need for recovery and reconciliation. They recognized that decades of trauma will not be healed over one generation. While they worked to improve their own lives individually, many also invested in healing for their communities. They often weighe staying in their community to retain and promote the goodness and strength of Indigenous culture against having to leave because of unhealthy social conditions such as lateral violence, inter-generational trauma, poverty, and addiction. They were challenged when education attained within their own communities did not prepare them for further education or employment outside of their community. Finally, when they came to the city to build a better life, discrimination permeated their interactions.

Immigrant participants were challenged by loss of family and culture and felt they had very little support navigating government systems upon their arrival in Canada. Some felt they were deceived with promises of jobs and a good life in Canada. Immigrants often found that the process and journey to attain the life they wanted in Canada was a longer more difficult one than they assumed it would be. Their frustration is one that has been documented by research on immigration and is largely due to a disconnect between how education, credentials, and employment history are valued by employers versus how they are valued in the points system used to rank candidates for immigration.

Participants are educated

A substantive majority of participants had completed high school, and one in three had completed a college or university program. These levels of education challenge the stereotype that marginalized people are uneducated.

The level of educational attainment for immigrants was higher than for the Canadian-born, influenced by the educational requirements for entry into Canada for immigrants. Li (2008) proposes that the social construction of race in Canada is "manifested in Canadians view of which groups are socially desirable according to racial origin", and that "racial groupings are associated with unequal earnings in the labour market" (p.21). He uses a variety of Canadian national surveys to show that when education and other demographic factors are considered, race plays a role in limiting the monetary value of education. This racial distinction applies to both Indigenous Canadians and immigrants of colour (Li, 2008).

Participants talked about the racialization of economic return, where education translates into differential income. Additionally, the challenge of having foreign credentials recognized is time consuming and costly and some respondents found accessing information and navigating the process daunting. In other cases, there were barriers to jobs, even when education abroad was commensurate with training in Canada. Finally, for some participants, life experiences such as dealing with trauma or difficulty, or being incarcerated, resulted in gaps in education and time in the labour market; both of which contributed to lower economic returns.

Good health is important

Good health is an important factor in building Social Capital. If one feels healthy, they are more likely to build relationships and access services and opportunities in the community. When one moves from homelessness to being housed and supported, they are likely to spend more time and energy on health and wellness. Collaborators and participants pointed out that when basic needs are met, one can begin to address chronic health problems. The data supported the tendency to ignore or diminish disability or chronic illness, in that participants often stated that they had a chronic medical condition or disability, but at the same time deemed themselves *healthy*, even though they did not have treatment or support for their condition.

Trust is essential

Trust is typically considered to be positive, however, when a person is marginalized, and especially if they are homeless, trust may not be a good survival strategy. One must be discerning about who to trust and which information to trust. Despite this caution, many participants had strong relationships of trust with their peers and with the agencies that served them. Trust was strongest when relationships were established and proven. Those who had long-standing relationships with case or service workers were most likely to have high levels of trust and to feel at ease to get help for their most hurtful and personal problems. A collaborator framed this process well in stating that some clients use a specific service because they are not comfortable dealing with other issues, and a relationship of trust must be built before the primary need can be addressed.

For some participants their lifestyle or conditions of health or substance use were the impetus for the breakdown of trust with family and community. For others, it was their decision to respond to the pull of positive change to leave community for employment or education, or the push of negative factors such as unhealthy family or community.

The homeless are vulnerable to violence and abuse and must be careful about who to trust. Homeless participants talked about the difficulty of finding safety when sleeping rough, where they were in danger of being beaten and where they often did not feel safe from authorities for sleeping in sites where overnight stays were not allowed. For this group, building relationships with service providers who came to their sites was essential to their physical survival, but also was the basis for building trust that helped them to access further services at more unfamiliar sites.

Indigenous participants discussed the legacy of residential schools and the systemic racism that destroyed trust over many generations. This lack of trust makes it difficult within and beyond ones' community. Lack of trust is entrenched through racism at the community level but also within institutions. Indigenous participants talked about having to specifically choose services, and sometimes having to leave their neighbourhoods in order to receive services where they could establish trust. Furthermore, serving time in incarceration, in an environment of distrust, hate, and racism, made it difficult to build a better life when released.

Immigrants, and more specifically recent newcomers to Canada, reported high levels of trust for service providers and community. For them the reception and assistance they received from settlement workers built trust. For others, who were not as recent to Canada and were non-Caucasian, experiences of discrimination in the community and workplace served to erode trust.

Work-arounds are helpful

When participants faced difficulty navigating a process or finding help, they often found their own ways (work-arounds) to move forward. These actions were evidence of ingenuity and strength and a commitment to using ones' personal resources to build a better life.

Work-arounds were discussed in earlier parts of this report, but to recap, one example is the communication strategy of Indigenous people using their own resources and

connections through the *Moccasin Telegraph*. Using this method, Indigenous people felt safe and confident that they could locate others.

A second example of a successful work-around is drawn from a group of immigrant women who formed a support group using a social messaging app to share job postings, check-in with each other, and offer emotional and social support in their search for work.

Transitions are difficult

Completing a program and moving on to independence is often considered a key measure of success, however, transition may also be a time of increased vulnerability. Transitions out of programs were noted as the most difficult. One may not have the skills, resources, or confidence to meet new challenges once they lose the structure and support of the program they left. Despite best efforts, one can lose some of the successes they have gained.

A group of mothers graduating from a rehabilitation program expressed their hope of being reunited with their children. One of their greatest barriers was around housing. Getting adequate housing was a requirement to get children back, and having their children with them was a requirement to get housing. This situation created a difficult cycle that impeded their journeys to a better life. Further exacerbating this situation was an inability to find mainstream and consistent employment to be financially able to afford and sustain housing. When unable to be successful in the mainstream labour market, many participants were forced to return to sex work.

For participants who had been homeless, adjusting to being housed was often difficult because of restrictions on guests and visitors. Being housed separates one from the community they had while homeless, thus being housed may result in a lonely and isolating experience, especially when the receiving community is not welcoming.

Often it is the gap between services that makes transitions difficult, but at other times, in the busyness of serving increasing numbers of clients, front line workers may not be aware of the services provided by other agencies and thus, be unable to make the most suitable referrals. Programs that assess individual client readiness for moving to independence or further programming, and that can provide and support smooth transitions can help to alleviate anxiety and recidivism. Furthermore, open ended programs that allow clients to stay in-program until they are ready to leave are also helpful, but this approach would make predetermining program costs and defining success more difficult.

Ideas for Further Work and Research

The suggestions in this section are drawn from the insights of research participants, community collaborators, and the research team. While some of the themes for research fall into the pure research category, others would be best addressed through community-based action research. These suggestions are categorized but it is important to note that many of the categories overlap.

Health

The relationship between health data and Social Capital was not deeply explored in the Better Life project. Further exploration of the reciprocal effects of Social Capital and health is needed. A growing body of literature provides evidence of the reciprocal relationships between physical and mental health, and Social Capital (Lin, 2001). A meta-analysis of 148 studies on mortality and Social Capital found that those with stronger social relationships had better mortality rates (Holt-Lunstad, 2010). A Canadian analysis of health and Social Capital draws from the 2003 General Social Survey data to show that building Social Capital should be a part of Public Health Policy (Canada, 2006).

While the relationship between Social Capital and health is well established, further research is needed to explore how trust, self-esteem, and connection can protect and support health in the community. Suggested topics include:

- Barriers to accessing health care for the homeless or precariously housed
- Mental health issues and barriers to accessing services for specific populations
- The stigmatization of illness (e.g. mental health, HIV)
- Health and traditional medicine and spiritual practices in the Indigenous community
- Navigating traditional practices in health care for newcomers to Canada

Discrimination

The evidence in this study shows a depth and breadth of discrimination that may be surprising to the greater community. While Social Capital may be a protective factor in coping with discrimination, it does not serve to address or explain the cause. It would be remiss to focus only on strategies to cope with discrimination and not look at the forces behind its' pervasiveness. Our community of participants suggested that research should be carried out with those who discriminate. Some of the topics suggested included:

- Motivations and reasons for discrimination
- Deterrents to discrimination
- Building relationships with other communities that experience discrimination
- Building community that values everyone
- Socialization of discrimination

Relationships between Indigenous Peoples and Immigrants

Immigrant newcomers to Canada, and Indigenous newcomers to Edmonton, often have similar experiences when it comes to building a new life in the city; leaving loved ones and community behind, finding housing, finding work or educational opportunities, and adjusting to a new community. Newcomer participants reported that they were socialized by their longer established peers, co-workers, and service providers, to consider Indigenous people as lesser than, and to subsequently discriminate against them. At the same time, Indigenous participants believed that immigrant newcomers were given preferential treatment when accessing services and that they received more financial assistance than Indigenous people. These beliefs created tension as Indigenous and immigrant participants often lived in the same neighbourhoods. Suggestions in this area included:

- Learning about similarities of practice and belief
- Creating activities and programs that bring newcomer and Indigenous communities together
- Recognizing practices and information that undervalue Indigenous culture
- Findings ways to share and promote Indigenous cultural practices and beliefs that could be of shared benefit to newcomers

Transition Points

There are many transitions in ones' life journey. Participants discussed the difficulty of transitions and the jeopardy of having to make them at a time that was not dictated by their progress or readiness for change. They were challenged by forces outside of their control, such as programming with finite terms, or supports with set dollar amounts or timelines. Examples given included leaving a rehabilitation or support program, leaving

incarceration, entering or leaving supportive housing, or completing education. Themes included:

- Rates and costs of recidivism
- Open-ended or finite programs social return on investment
- Emotional, social, and health costs of recidivism
- Benefits of social programs (breaking down NIMBYism¹⁴)

Spiritual, Religious and Cultural Practices

For many participants, spiritual, religious, or cultural practices provide the strength to face everyday challenges, and to stay on a path to building a better life. The importance of these practices to participants became apparent in this project but a more in-depth look at this topic is warranted. The Better Life data collection tools contained only high level questions on this topic and did not differentiate between Indigenous and non-Indigenous spiritual practices.

In a majority of cases, cultural or spiritual practices were positive, however, some respondents felt that they had to choose between these practices and moving forward to build a better life. This was true of Indigenous people moving off traditional lands. It was also true for some immigrants whose integration in Canadian culture was seen as abandonment of traditional cultural values and practices. Further topics included:

- The relationship between traditional and non-traditional Indigenous religious/spiritual practices
- How religious comunities support building a better life
- Transitioning between secular and non-secular societies

People Living Without Support or Connection

A small proportion of the participants in this study (approximately 9%) indicated that they had no-one to turn to if they needed support, whether it be for care when ill, needing advice, looking for a job or housing, needing money, or for someone to talk to when sad. This group was also more likely to have experienced homelessness, and to be less healthy. Agencies that work with chronic conditions, work with supportive housing, or provide wrap-around services are best informed about this group. Further research is needed to learn from a larger body of Edmontonians who fall within these categories. Service providers are best equipped to offer insight into what is done, and what could be done to help this marginalized group to build a better life.

¹⁴ NIMBY: Not in my backyard

Resources for the Community

It is the desire of the research team, collaborators, and participants that this project remain the property of the community that built it. The research is meant to be used in the community and by researchers to inform further work.

The Building a Better Life webpage, hosted on the NorQuest website, will remain active after the project ends to serve as a repository for downloading materials related to this research project at http://norquest.ca/better-life. These materials are also available by contacting the researchers. The materials include:

- Social Determinants of Differential Success: Building a Better Life Final Report
- Building a Better Life Methodology Map
- Building a Better Life Case Study Life Maps A, B, & C
- Building a Better Life Overview of Skills, Supports & Contributions
- Building a Better Life Community Booklet
- Building a Better Life Survey Instrument
- All Participants Frequencies & Descriptives
- Indigenous Subgroup Frequencies & Descriptives
- Immigrant Subgroup Frequencies & Descriptives
- Canadian-born non-Indigenous (CBNI) Subgroup Frequencies & Descriptives
- Problematic Substance Use (PSU) Subgroup Frequencies & Descriptives
- Ever Homeless Subgroup Frequencies & Descriptives
- Poor Health Frequencies & Descriptives

Research Team Contact Information

The researchers are open to present data, to discuss next steps, or to develop further research ideas. The Better Life project came to a close on June 30, 2019 and the research team should be contacted using the information below:

Marlene Mulder – <u>marlenejmulder@gmail.com</u>; phone 780-893-3964 Robert Marvin – <u>bobmarvin@shaw.ca</u> Colette Cornejo – <u>colettecornejo@gmail.com</u>; phone 780-934-9738

Presentations to Date

Interest in the Better Life Project was shown with six articles in popular media, two podcast interviews, eight media interviews and one article in a peer edited journal. The researchers also worked with the Edmonton Community Foundation as members of the working group for the 2016 Vital Signs – Immigration Issue. They are also on the research committee for the Edmonton Local Immigration Plan Research Group.

Throughout the project community collaborators invited the research team to make presentations at their locations. Three times throughout the process public presentations were offered and took place at Edmonton Public Library, NorQuest College and Edmonton City Hall. Presentations were also made at Social Work conferences locally and provincially. Outside of Alberta presentations were made at the Colleges and Institutes Canada Conference in Victoria, Congress of Humanities and Social Sciences Conference in Toronto, and the International Social Work Conference in Dublin Ireland where four presentations were made. A list of presentations and conferences follows.

Community Presentations (22)	Location
Refugees in Edmonton	Guest Lecture, King's University, Edmonton, Alberta, 2015
Creating Research Partnerships to Learn How Social Capital Affects Human Capital to Build Better Futures	Edmonton Coalition on Housing, Edmonton, Alberta, 2016
Determinants of Social Capital and Differential Success: Building a Better Life - Year One	Public Presentation, Edmonton Public Library, Edmonton, 2016
Immigration and Settlement Learning Day: Mobilizing Knowledge to Inspire Action. Margins and Spaces: Canadian Context	City of Edmonton Local Immigration Partnership. 2016 Guest Lecture, University of Alberta,
	Edmonton, Alberta, 2016
Refugees Issues in Edmonton	Guest Lecture, University of Alberta, Edmonton, Alberta, 2016
Students Participating in Research	Business Class, NorQuest College, 2016
Understanding Research and Ethics	Social Work Class, NorQuest College, 2016
Building a Better Life Project	Presentation to NorQuest Library Services, 2017
Building Capacity from Classroom to Community (Poster)	College Wide Learning Day - NorQuest College, 2017
Community-Based Research	Community Services Leadership, City of Edmonton, 2017
Determinants of Social Capital and Differential Success: Building a Better Life - Year One	Edmonton Coalition on Housing, Edmonton, Alberta, 2017
Determinants of Social Capital and Differential Success: Building a Better Life - Year Two	Public Presentation, NorQuest College, Edmonton, 2017
Learning from Each Other to Strengthen Ourselves and Community	City of Edmonton, Lunch and Learn, Edmonton, 2017
Presentation with NorQuest Students' Association	Wellness Summit, Lister Hall, University of Alberta, 2017
Building a Better Life: Mapping Methodology & Case Studies	M.A.P.S. Showcase, Edmonton, 2018
Determinants of Social Capital and Differential Success: Building a Better Life	Public Presentation, City Hall, Edmonton, 2018
Journeys to a Better Life: Overcoming Discrimination and Social Exclusion	Hope and Resilience in Changing Times Conference. Edmonton. 2018
Determinants of Social Capital and Differential Success: Building a Better Life	City of Edmonton, Lunch and Learn, Edmonton, 2018
Building a Better Life: Initial Findings	H.I.V. Edmonton, Edmonton, 2018
Building a Better Life: Mapping Methodology & Case Studies	M.A.P.S. Showcase Conference, Edmonton, 2018
Determinants of Social Capital and Differential Success: Building a Better Life	Family and Community Support Services, ED Meeting, 2019

Conference Presentations (23)	Location
Social Work Students Study Loneliness:	Alberta College of Social Workers
From Classroom to Community	Conference, Edmonton, Alberta, 2016
Building Research Capacity from Classroom	University of Calgary Social Work Research
to Community	Symposium, Edmonton, Alberta, 2016
Building a Better Life: Differential Needs &	Alberta College of Social Workers
Similar Conditions	Conference, Edmonton, Alberta, 2016
Building a Better Life: Moving Out of	University of Calgary, Social Work Research
Marginalization	Symposium, Edmonton, Alberta, 2017
Building a Better Life: Moving Out of	Alberta College of Social Workers
Marginalization	Conference, Calgary, Alberta, 2017
Building a Better Life: Differential Needs &	Congress of Humanities & Social Science,
Similar Conditions	Toronto, Ontario, 2017
How Social Capital Affects Human Capital to	7th Annual Central Alberta Social Work
Build Better Futures.	Conference, Red Deer, Alberta, 2017
Creating Research Partnerships to Build a	Alberta Colleges and Institutes Faculty
Better Future	Association, Canmore, Alberta, 2017
Bringing Community Together to Build	Central Alberta Social Work Conference,
Relationships to Serve the Marginalized:	Red Deer, Alberta, 2017
Community-Based Research	
Determinants of Social Capital and	University of Calgary Social Work Research
Differential Success: Building a Better Life	Symposium, Edmonton, Alberta 2017
Determinants of Social Capital and	Colleges & Institutions Canada Conference,
Differential Success: Building a Better Life	Victoria, British Columbia, 2018
Bringing Research to the Community: From	Alberta College of Social Workers
Planning to Publishing to Presenting	Conference, Edmonton, Alberta, 2018
Bringing Research to the Community: Life	Central Alberta Social Work Conference,
Maps that Show Strength and Resiliency	Red Deer Alberta, 2018
Building Collaborative Research with Social	Alberta Colleges and Institutes Faculty
Work Students that Benefits College	Association Conference, Jasper, Alberta,
Services	2018
Bringing Research to the Community:	Colleges & Institutions Canada Conference,
Planning to Publishing to Presenting	Victoria, British Columbia, 2018
Building Collaborative Research with Social	Colleges & Institutions Canada Conference,
Work Students	Victoria, British Columbia, 2018
Community Research that Builds	Alberta Colleges and Institutes Faculty
Relationships with the Community	Association, Jasper, Alberta, 2018
Community Research that Builds	International Social Work Conference,
Relationships with the Community	Dublin, Ireland
Bringing Research to Community: Life Maps	International Social Work Conference,
that Show Strength and Resiliency	Dublin, Ireland (poster) 2018
Transcending Barriers: Protections and	International Social Work Conference,
Networks to Overcome Discrimination and Social Exclusion	Dublin, Ireland, 2018
	International Social Work Conference
Building Collaborative Research with Social Work Students	International Social Work Conference, Dublin, Ireland
Research That Brings Community Together	Hope and Resilience in Changing Times
to Build Relationships and Serve the	Conference, Edmonton, 2018
Marginalized	
Determinants of Social Capital and	Social Innovation Research in Alberta; Field
Differential Success: Building a Better Life	Reports from the Field 2018 SSHRC
	Symposium. Calgary, Alberta.
	Symposium, Calgary, Alberta.

Project Collaborators

The following is a list of the project collaborators. The bolded entries are the sites where data collection took place, along with the number of events in brackets.

Action for Healthy Communities (1) Africa Centre (1) Alberta Community & Social Services Alberta Culture & Tourism Alberta Health Services Bent Arrow Traditional Healing Society – Parent Link Centre (2) **Bissel Centre (2) Boyle Street Community Services (1)** Bredin Centre for Learning in Alberta (1) Canadian Mental Health **Catholic Social Services (1)** City of Edmonton - Community Inclusion City of Edmonton – Family Supports City of Edmonton, Citizen Services, Millwoods Site (1) Creating Hope Society Distinctive Employment Counselling Services of Alberta (DECSA) (1) E4C Edmonton Community Foundation Edmonton Food Bank (1) Edmonton Immigrant Services Association (1) Edmonton Mennonite Centre for Newcomers (3) Edmonton Native Healing Center (2) **Edmonton Public Library (3)** Federation of Community Leagues George Spady Society (2) **HIV Edmonton (2)** Homeward Trust M.A.P.S. Alberta Capital Region Marian Centre Métis Child and Family Services Society (1) **Multicultural Health Brokers** Native Counselling Services New in Town Aboriginal Welcome Service (1) Niginan Housing Ventures (Ambrose Place) (1) NorQuest College (Day Home Provider program) (3) NorQuest College (LINC program) (1) NorQuest College (Social Work program) (1) NorQuest College (Wetaskiwin Campus) (2) Rupertsland Institute The Candora Society – Edmonton (1) The House Next Door (1) The Mustard Seed (2) Wichitowin YMCA

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Signed: Marlene Mulder, Robert Marvin, and Colette Cornejo

I started my journey of recovery in a native healing circle. The grandmother (First Rays of The Sun Woman) took me under her wing. We developed a divine connection. She made me feel safe to speak about my wounded inner core child issues... For four years I have run an empowerment circle and it's been the most uplifting experience of my life. – Strong Horse

The Better Life Project gave opportunities for both organization and client participation and experience. It was engaging for participants and recognized the value and importance of belonging through participation. It allowed all who took part to be collaborators and to have ownership through input and learning. – Patti Brady, Bent Arrow Traditional Healing Society

Image of a talking stick that was gifted to the Better Life project by Strong Horse.



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