

United Way

Community Priorities & Long-term Outcomes: Summary and Guide

September, 2010



United Way
SERVING KITCHENER-WATERLOO
And the Townships of Wellesley, Wilmot and Woolwich



United Way
of Cambridge and North Dumfries

United Way
Community Priorities &
Long-term Outcomes:
Summary and Guide

September, 2010

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INTRODUCTION

The purpose of this document is to clearly explain the rationale for each of the existing United Way community priorities and long-term outcomes, as well as the implications of these priorities for United Way investment. This document does not discuss all the needs within the local community; nor is it a policy document of the United Way. Community priorities and long-term outcomes may change over time in response to new research or changing local needs. This document is not intended to limit or constrain this process. It is focused on describing United Way community priorities and long-term outcomes as they exist today.

OVER THE PAST SEVERAL YEARS, United Way of Kitchener-Waterloo and Area and United Way of Cambridge and North Dumfries have been examining local and national trends to determine the key community priorities and pressing issues in our communities, and to identify the specific kinds of community change that are needed to address these issues. Their process of determining community priorities has been highly consultative. The Region of Waterloo, the Centre for Community Based Research, and Wilfrid Laurier University have all been active partners. Many local agencies and groups have had input. Local research reports have also been drawn upon extensively. The final set of community priorities and long-term outcomes listed below was also informed by input gathered through an anonymous on-line survey.

Together, the Boards of the two United Ways have now established five community priorities for United Way investment. These community priorities are broad domains that have regional reach and local impact. Within each of the five United Way community priorities, three long-term outcomes have been developed. These long-term outcomes are statements that identify the specific, measurable types of community change that United Ways are actively working towards in order to make progress towards achievement of community priorities. Although these 15 long-term outcomes do not capture all of the types of change relevant to each community priority, they are intended to reflect United Way's best understanding of the changes that are needed in order to make a measurable difference in the community condition identified in the community priority statement. Taken together, the three long-term outcomes in each community priority are intended to constitute a comprehensive strategy that is consistent with United Way's mandate, and capable of making lasting change in the community.

The Community Priorities and their associated long-term outcomes are as follows:

Community Priority #1: All children and youth reach their potential

Long-term Outcomes:

- 1.1 Children and youth are free from abuse and neglect
- 1.2 Children and youth succeed in school
- 1.3 Children and youth are healthy

Community Priority #2: All families are strong

Long-term Outcomes:

- 2.1 Families are free from violence
- 2.2 Families are resilient and supported by their community
- 2.3 Families with complex needs are supported

Community Priority #3: All neighbourhoods and rural communities are inclusive and thriving

Long-term Outcomes:

- 3.1 Neighbourhoods have inclusive and safe gathering places
- 3.2 Neighbourhoods have strong, accessible supports and services
- 3.3 Neighbourhoods have diverse groups that are connected and working together to take action

Community Priority #4: All newcomers are welcomed and supported

Long-term Outcomes:

- 4.1 Newcomers are meaningfully employed
- 4.2 The community is inclusive and newcomers are free from discrimination
- 4.3 Newcomers are involved in and have a voice in community settings

Community Priority #5: All people are economically secure

Long-term Outcomes:

- 5.1 Education, training, and learning opportunities are accessible to all
- 5.2 People have sufficient and stable employment
- 5.3 People have basic needs met

ABOUT THIS DOCUMENT

THIS DOCUMENT IS DESIGNED for multiple audiences. Our hope is that local agencies will find this document useful as they work to articulate the ways in which their programs contribute to the long-term outcomes. United Way staff members and volunteers will also use this document as a reference in community planning and in making decisions about future investments in the community.

This document is organized by community priority and, within each priority, by associated long-term outcomes. Each priority is introduced with a background description and a review of relevant demographics and statistical information that lends context to the priority area in the local region. Following this background information, each long-term outcome is described using the following sub-headings:

Explanation: This subsection defines and describes the concepts in the outcome in greater detail and provides a few illustrative examples. For example, in the outcome “Newcomers are meaningfully employed”, the concept of meaningful employment is defined more specifically. In some cases, other related outcomes are described to further illustrate the nature of the long-term outcome. For example, “Children succeed in school” can reflect several other positive changes regarding academic success and learning skills, a sense of inclusion, and prosocial behaviors in the school environment.

Rationale: This subsection provides some explanation as to why the outcome is of high importance to United Way community investment. In part, the rationale for pursuing each outcome follows from the community identifying them as important. This section also warrants outcomes in reference to a broader theoretical understanding of health and wellness of the populations of interest (e.g., school success is a necessary precursor to health and resiliency in adulthood). The rationale also includes currently available statistics, demographics, and other information known about local needs to provide some context regarding the current status of the outcome.

United Way Scope of Investment: This subsection provides some general statements regarding the scope and boundaries of United Way investments in relation to each outcome. The goal of this section is to provide a degree of guidance about which types of programs, interventions, and initiatives are most relevant to the outcome area. It is also hoped that this section is helpful in distinguishing between the range of outcomes. For example, United Way’s scope of investment in relation to “Children are free of abuse and neglect” is limited in principle to individually-focused programs to prevent abuse and/or mitigate its effects. In contrast, anti-violence initiatives that target families at a community wide level are better aligned with the “Families are free of violence” outcome.

However, it is recognized that some of these distinctions are academic. A comprehensive program or systems initiative may hit upon multiple outcomes in more than one priority area, and appropriately so. It is therefore emphasized that the content of this section is not meant to be overly prescriptive. While there are some program types or contexts outside United Way's mandate that are unlikely to be funded (such as funding school boards directly to improve school success), the local United Ways welcome and wish to promote dialogue about social innovations that may affect multiple outcomes in multiple ways. The scope of investment merely provides a starting point for such dialogue.

Key terms are defined in the Glossary. Additional sources of information and research related to the rationale for each community priority are included in the References section.

How This Document was Created

The priorities and long-term outcomes listed here were created in 2008 after a process of intensive community consultation. A draft version of this document was circulated in the spring of 2010. A series of four public community consultations were held in different locations throughout the region. More than 100 community members, including United Way volunteers, funded agencies, other funders, government representatives and researchers provided suggestions on the source material, the content and format of this report.

This revised version incorporates their feedback. Many additional research citations have been added, and a new section explaining relevant theoretical frameworks has been created. The implications of this information for United Way investment decisions have been made clearer.

ORIENTING FRAMEWORKS THAT INFORM THE COMMUNITY PRIORITIES AND LONG-TERM OUTCOMES

IN ORDER TO BE FULLY FOCUSED on *community impact*, it is helpful to draw upon available theoretical frameworks that help explain how positive change happens in communities. Community impact reflects change that comes from many different sources of influence. For example, the United Ways in the Region have recognized that outcomes such as “Children and Youth are Healthy” are *multi-determined*. Simple interventions, such as those that promote good parenting strategies, certainly benefit child and youth health, but so do access to health services, positive and supportive learning environments, healthy eating and nutrition, and a range of other influences. All of these important factors are also influenced by family and economic health, which relate to employment conditions and the negative impacts of poverty.

To be community impact oriented means that community priorities need to comprehensively reflect this broad range of influences. The United Ways in the Region have selected outcomes that represent this range. Thus, community priorities strongly suggest programs and other social and community interventions that are capable, collectively, of strategically impacting these outcomes.

It has been helpful for the United Ways in the Region to draw upon several different theoretical frameworks in order to ensure that the long-term outcomes in each community priority constitute a balanced and comprehensive strategy. The three main frameworks that have influenced the community priorities and long-term outcomes are *Social Determinants of Health*, the *Resilience Framework*, and the *Sustainable Livelihoods Framework*. Each of these is similar in intent, but differs in some important ways.

Social Determinants of Health

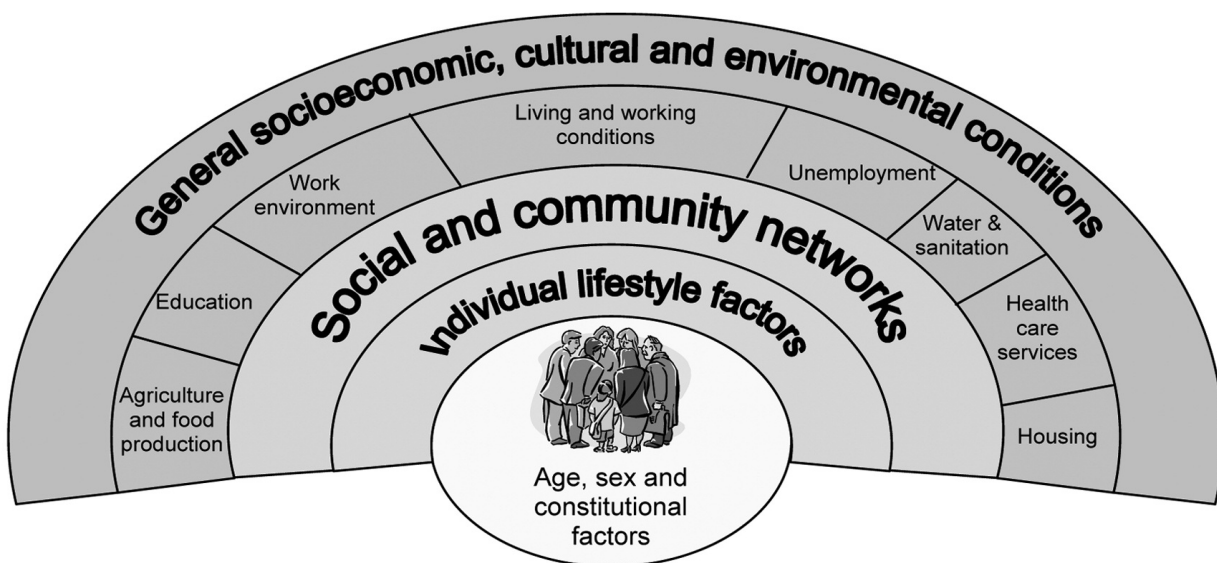
Social Determinants of Health (SDOH) is a general framework that posits that individual outcomes (commonly related to health and well-being) can only be understood in the context of multiple individual and environmental influences. There are many different definitions and taxonomies of SDOH. Krieger (2001) conceives as SDOH as “...*both specific features of and pathways by which societal conditions affect health and that potentially can be altered by informed action. Examples are income, education, occupation, family structure, service availability, sanitation, exposure to hazards, social support, racial discrimination and access to resources linked to health.*” Other conceptualizations may include individual factors, such as healthy or unhealthy behaviors (e.g., nutritious diet, exercise, use of tobacco), psychosocial factors (e.g., low self-esteem), service variables (e.g., accessibility) or biophysiological risks (e.g., disabilities, congenital abnormalities, etc.) (Labonte, 1998).

A social determinants of health approach also recognizes that macro-level conditions in society systemically affect individual health and well-being, The World Health Organization states that “conditions in which people are born, grow, live, work and age, including the health system, are shaped by the distribution of money, power and resources at global, national and local levels, which are themselves influenced by policy choices. The social determinants of health are mostly responsible for health inequities - the unfair and avoidable differences in health status seen within and between countries.” (WHO, 2005; see also The National Collaborating Centre for Determinants of Health, 2006).

It should be noted that “determinants” and “outcomes” may often be the same thing. For example, a program may attempt to improve parenting knowledge and skills, which is an outcome in its own right. However, parenting knowledge and skills is also a family level social determinant that impacts the outcome “improved child health”. To take another example, a city water treatment intervention may improve a water quality, which in turn may improve the health of citizens. Social determinants, then, reflect a web of interconnected outcomes that range from the individual up to the societal.

Because healthy individual, family, and community development (and conversely risk) follows from a complex interaction between many individual, family, and social/community factors, a number of researchers have attempted to arrange SDOH within “ecological frameworks” – general diagrams that try to capture different levels of influence on individuals (e.g., Dahlgren & Whitehead, 1991). Figure 1 provides an example of the sorts of models that have been developed, in which social determinants lay at multiple levels of the ecological system.

Figure 1. Ecological Model
(excerpted from Dahlgren & Whitehead, 1991)



Research and theory on social determinants of health recognize the importance of addressing long-term outcomes at multiple levels, from strengthening community capacities and the socio-economic environment to group and individual support and intervention. In this way, the community priorities and long-term outcomes in this document are associated with a broad and balanced subset of determinants and United Ways in the Region are better armed to truly target “community impact”. A social determinants of health perspective will help future understanding of how the range of funding investments are targeting different levels of community systems – from a focus on individual change to higher level systems changes.

The Resilience Framework

Sherri Torjman developed a framework of social intervention and capacity, called the “Communities Agenda” that draws on the concept of resilience. According to Torjman, resilience represents the ability of communities and the people within them to survive adversity, adapt to change, and thrive in the context of new opportunities. This led to the conceptualization of four “clusters” of resilience, or as she puts it, the *substance of the communities agenda*: sustenance, adaptation, engagement, and opportunity. This is where the framework overlaps heavily with a social determinants of health perspective.

1. *Sustenance* is concerned with the basic needs and security necessary for physical and emotional well-being, such as affordable housing, adequate income, immunizations, access to clean air, water, and nutrition.
2. *Adaptation* refers to basic coping skills and capacities that can serve to protect against contemporary life stressors and dysfunction and such as job loss, illness, abuse, family breakdown, and economic recession. In this cluster of resilience, adaptation not only protects against difficulties, but reflects adjustment, learning, and strength as a consequence. Adaptive coping skills refer to psychological, cognitive, and social skills such as empathy, problem-solving, literacy, numeracy, communication, etc. Most of these skills are crucial to what Torjman calls the “knowledge economy”. Literacy, for example, is a key indicator of community health and economic growth. Adaptation is supported by investment in social infrastructure, such as early childhood development initiatives, assistance to newcomers, education, support networks, and so on.
3. *Engagement* is a core element of resilience that relies on the active participation of community members. Civic engagement, volunteerism, leadership, recreation, the arts, and political participation reflect the agency and contribution of community members in social and civic affairs. A high level of participation requires a reduction of social and physical barriers for disadvantaged groups, the creation and maintenance of shared public spaces, and inclusive forums and events for engagement.
4. *Opportunity*, the fourth resilience cluster, refers to large scale activities that promote broad community and economic development, urban renewal and planning, entrepreneurship, training and education in targeted growth centres and sectors, and other areas of innovation. This cluster is far more open-ended than the others. For example, the growth and employment strategies of two cities may differ substantially, yet both will always need to be concerned with adaptation and coping skills as just described.

The resilience clusters look a lot like social determinants of health. However, this framework adds another lens to look at social problems. Torjman argues that a comprehensive and impactful community agenda requires the following *core tasks*:

1. *To create healthy resilience clusters by improving the links among actors within each of the clusters*, for example between income support and housing systems.
2. *To improve the links between the core resilience clusters*, for example between language training programs for newcomers (adaptation) and spaces for social networking among cultural groups (engagement).
3. *To improve the links among communities and governments*, for example between government policy makers and affordable housing advocates.

By examining the “shared spaces” within and between clusters, it is possible to identify new ideas for social intervention. This represents a different sort of categorization of social determinants of health, although perhaps not radically so. In reference to the United Ways’ community priorities and long-term outcomes, the Resilience Framework does illuminate several issues. First, the community priorities and outcomes of the United Ways in the Region are concentrated in the adaptation and engagement resilience clusters. The United Ways’ scope of investment is less focused on the sustenance cluster (e.g. funding housing infrastructure, income support programs) or opportunity cluster (e.g., broad areas of collective entrepreneurship). The United Ways, however, are becoming much more active in its relationships to government, other funders, and a range of community interests in moving toward a community impact agenda. In this way, linkages are being made that implicate the other clusters.

To be community impact oriented (following this framework), the investment strategies of United Way may need to more closely examine the “spaces between the clusters”. How can community agencies be funded in a way that promotes and reinforces the linkages suggested by the Resilience Framework?

Sustainable Livelihoods Framework

United Ways in the Region have also drawn upon the Sustainable Livelihoods Framework. This model (Tamarack Institute, 2010) has been adapted from the work of the UK Department of International Development (1999). They define “sustainable livelihood” as:

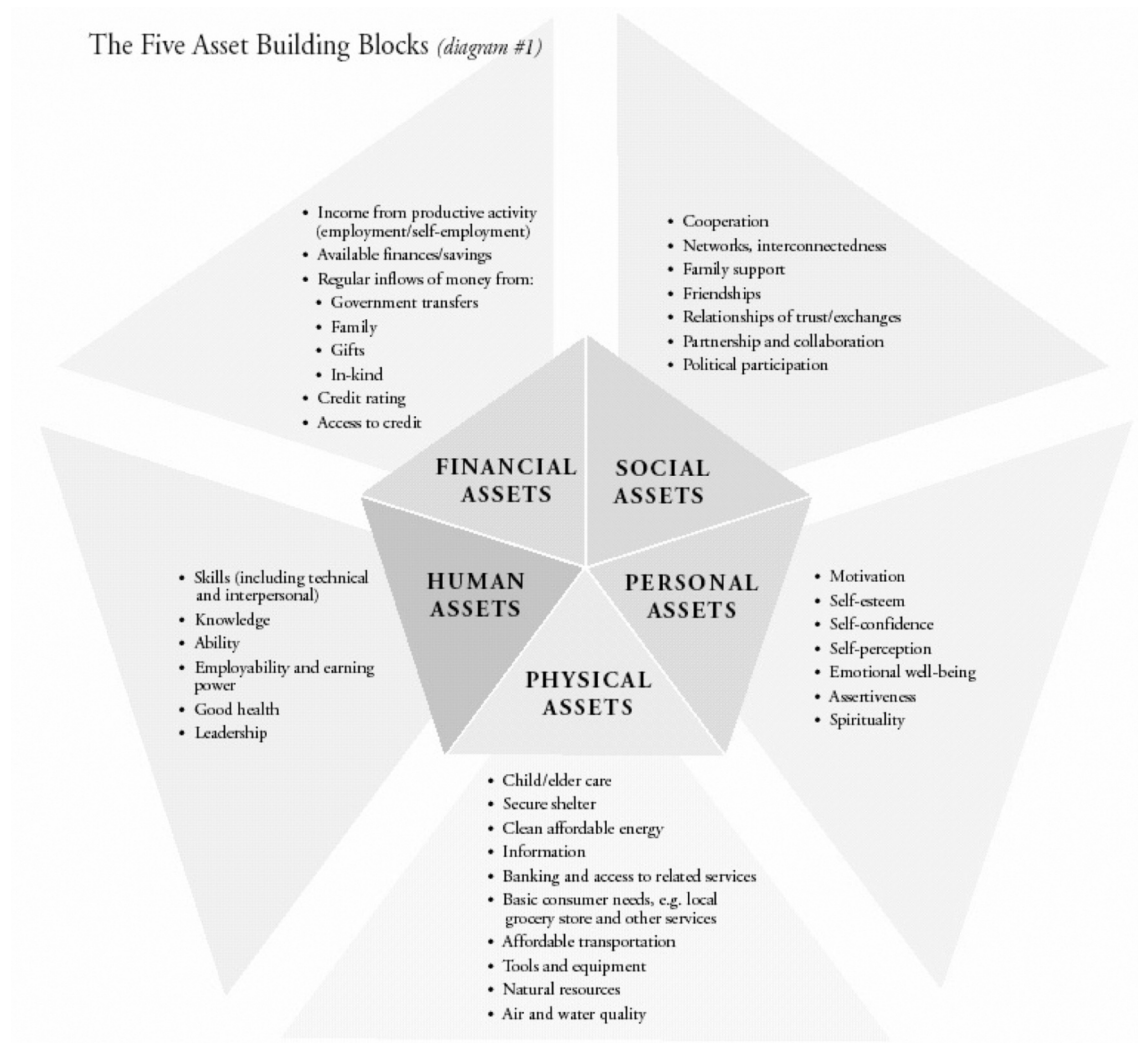
A livelihood comprises the capabilities, assets (including both material and social resources) and activities required for a means of living...A livelihood is sustainable when it can cope with and recover from stresses and shocks and maintain or enhance its capabilities and assets both now and in the future.

The Sustainable Livelihoods Framework represents an anti-poverty strategy and uses the language of assets. There are five major asset areas:

1. *Human Assets*, such as skills, knowledge, and abilities.
2. *Financial Assets*, such as income, credit, and savings.
3. *Social Assets*, such as friendships, family supports, networks, and partnerships.
4. *Personal Assets*, such as self esteem, motivation, confidence, and emotional well-being.
5. *Physical Assets*, such as shelter, child care, natural resources, transportation, and food.

The language of assets is roughly comparable to what the United Ways in the Region call outcomes. Assets are also fairly synonymous with social determinants of health and Torjman’s resilience clusters. According the Sustainable Livelihoods Framework, the goal of social interventions is to improve the assets of community members. Like the other frameworks, social interventions can target individual assets directly (e.g., programs designed to enhance human assets of parenting knowledge and skills) or indirectly by intervening at higher community or system levels (e.g., a community-wide employment training and income supplement program designed to enhance family incomes and economic participation). Comprehensive community interventions that take aim at multiple asset areas at multiple levels are more likely to have greater affect on sustainable livelihoods.

Figure 2. Assets from the Sustainable Livelihoods Framework
(excerpted from Tamarack Institute, 2010)



The community priorities and long-term outcomes of the United Ways of the Region tend to focus most heavily on human, social, and personal assets, and less heavily on financial and physical assets. Investment strategies can be understood in context of these assets and the levels at which interventions and programs attempt to make change.

Summary: Theoretical Frameworks and the Community Priorities and Long-term Outcomes

The United Ways of the Region of Waterloo have organized their community priorities based on issues that were identified as important by local community members and organizations. The community priorities are roughly organized by identified *groups* – children and youth, families, newcomers, and neighborhoods. Priority area #5 is wholly inclusive, and refers to the economic security of *all* people. These groups overlap, such that children/youth and newcomers also fall under the family and neighborhood groupings.

The frameworks just discussed are useful in order to understand how concepts like social determinants, resilience clusters, and assets can be applied to these groupings. For example, the outcome “Children and Youth are Healthy” is very broad and is linked to a range of social determinants of health that exist at multiple levels, from individual nutrition education to family support, and the broader food security system, to name a few examples. Resilience clusters provide the same lesson in that all carry some relevance to this outcome; however interventions aimed at sustenance and adaptation are often more directly applicable. Sustainable Livelihoods demonstrates that some assets restate the outcome itself, such as “good health” and “emotional well-being”. Other assets, such as income, access to consumer goods, and air and water quality, are prerequisites (or determinants of) “children and youth are healthy”. Taken together, the frameworks describe a wide range of outcomes (and/or resources and environments that lead to outcomes) which in turn suggest a wide menu of possible interventions.

In the following table, each framework is summarized in terms of how the concepts are organized and some commentary on how social and program interventions relate. The frameworks are similar in many ways, each providing a structure to organize different types of outcomes and different influences on health and well-being of individuals and communities. Each framework also emphasizes the great interdependency of outcomes (social determinants, resilience clusters, and assets) such that interventions and community initiatives are more impactful and comprehensive if there is a collective effort to impact multiple areas or levels of concern.

This is useful for the United Ways of the Region as they look at their investment strategies and their scope. For example, a funding strategy that places a primary emphasis on individual skill building may benefit individual citizens in certain ways, but may be too narrow and limited of strategy to truly lead to broad community impact. Other social determinants of health, resiliency clusters, and assets need to complement individual skill building for there to be more comprehensive change.

These observations relate to the current actions of United Ways in the Region to reach out and form partnerships and collaborations with other funders, government, and groups of organizations to examine innovative approaches to comprehensive community impact. This represents a concerted move away from evaluation as a mere tool of funding accountability to a collaborative opportunity to understand the shared impact of investments on community change and development.

Table 1. Summary of Theoretical Frameworks

	Social Determinants of Health	Resilience	Sustainable Livelihoods
Organizing Principle	<p>Ecological or environmental levels, from individual to societal. For example:</p> <ol style="list-style-type: none"> 1. Individual characteristics and lifestyle 2. Family environment 3. Social networks 4. Socio-economic, cultural, political, environmental levels 	<p>Resilience Clusters</p> <ol style="list-style-type: none"> 1. Sustenance 2. Adaptation 3. Engagement 4. Opportunity 	<p>Assets:</p> <ol style="list-style-type: none"> 1. Human 2. Financial 3. Social 4. Personal 5. Physical
Interventions	<p>Attempt to change social determinants to improve a chain of health outcomes. Note that determinants and outcomes are often the same thing, depending on the intervention.</p>	<p>Attempt to improve resilience in relation to the different clusters. Effective interventions try to make strong links within and between clusters.</p>	<p>Assets are much like outcomes and interventions aim to improve outcomes. The most effective programs and initiatives are those that that work at multiple levels.</p>

We now turn to a detailed description of each of the community priorities and their associated outcomes.

COMMUNITY PRIORITY #1: *All Children and Youth Reach Their Potential*

THIS UNITED WAY COMMUNITY PRIORITY is focused on meeting the needs of all children and youth, including those with special needs or those who are members of vulnerable or marginalized communities. In Waterloo Region, youth are defined as individuals up to the age of 25. Waterloo Region is younger, on average, than the province of Ontario. There are approximately 41,095 children under the age of 6 in Waterloo Region (Statistics Canada, 2006 Census).

Table 2. Selected Census Indicators: Children and Youth

	% of population under the age of 15	% of population aged 15-19 attending school full time (2001 figures)	Median age of residents
Cambridge	20.4%	71.1%	36.4
Kitchener	18.5%	72.7%	36.6
Waterloo	18.3%	70.1%	35.4
North Dumfries	21.1%	78.2%	39.0
Wellesley	28%	39.8%	30.9
Wilmot	19.8%	69.5%	39.3
Woolwich	20.4%	62.2%	38.9
Waterloo Region	18.3%	70.4%	36.4
Ontario	18.2%	74.2%	39.0

Cambridge, Wellesley, Woolwich and North Dumfries had a higher proportion of residents under the age of 15 than the provincial average and than elsewhere in the region.

For children and youth to reach their potential, it is important that they have the resources and opportunities to grow physically and mentally in positive and nurturing environments. Despite a wide range of services for children and youth in Waterloo Region, there are still gaps. There are inequalities across neighbourhoods in the number of children vulnerable to experiencing developmental difficulties and differences in the availability of community resources, especially for children with special needs, new immigrant and refugee children, and First Nations children (Tardiff, 2009). Based on the literature and recent studies, the following long-term outcomes have been identified with regards to children and youth:

1.1 Children and youth are free from abuse and neglect

Explanation: Abuse and neglect includes direct abuse and neglect of the child or youth. It also includes exposure to family and gender-based violence and other forms of abuse, including peer violence. The causes of neglect can be very complex. Prevention is an important part of achieving this outcome.

Rationale: In 1991 the Canadian Government signed on to the United Nations Convention on the Rights of the Child. This document makes it very clear that access to basic human rights is a necessary precursor for children and youth to reach their potential. In Waterloo Region, the Alliance for Children and Youth has identified safety as one of the key developmental assets required for youth to succeed (2009).

Most readily available statistics suggest that rates of abuse and neglect in the region are stable. For example, Family and Children's Services of Waterloo Region averages nearly 1000 open child protection cases at any one time, and these rates remained fairly stable between 2003 and 2006 after rising throughout the 90's and early 2000's (F&CS, 2006). While recent research from the Crime Prevention Council suggests that local youth violence rates are below national averages (2009), ongoing attention to this issue is repeatedly called for in local reports.

United Way Scope of Investment: This long-term outcome refers to efforts that work directly with children and youth as individuals. It is addressed through supports that help to prevent child abuse and neglect, and exposure to abuse and neglect of others, including education and other types of prevention. United Way also supports initiatives that mitigate the effects of abuse and neglect, including counseling and other types of support for victims. Anti-violence efforts that are aimed at the entire family system or the community would align more closely with the Families are Free from Violence outcome in the All Families are Strong community priority.

1.2 Children and youth succeed in school

Explanation: Education is one key determinant of children and youth reaching their potential. Graduation and academic achievement depend on a number of factors, including inclusion, attendance, good learning skills and outcomes, and adherence to pro-social norms for behaviour.

Rationale: Successful completion of elementary and secondary school is an essential step on the road to health and resiliency in adulthood. A higher proportion of students in WRDSB high schools passed the 2008 grade 10 literacy test as compared to the provincial average (88% vs. 84% provincially, according to The Record). Students in the local Catholic board were slightly below the provincial average at 82% pass rate. Success in school may vary by neighbourhood across the region. Across both boards, high schools in Waterloo showed somewhat higher literacy test success (88.8%) than either Kitchener (84.4%) or Cambridge (83.8%).

The Federation of Canadian Municipalities (2010) recently found that libraries in Waterloo Region have an annual circulation per capita of about 10 books. This is slightly higher than the average for all 20 communities included in the study. Library use in the region rose slightly between 2001 and 2006.

Youth who drop out of school are at greater risk for joining street gangs (Crime Prevention Council, 2009). Some of Waterloo Region's young adults do not have high school diplomas or equivalent certificates.

United Way Scope of Investment: Although United Ways in Waterloo Region do not directly fund schools they do support other kinds of activities that help children and youth to succeed in school. These activities may include, but are not limited to, after school support, peer mentoring programs or counseling.

1.3 Children and youth are healthy

Explanation: The focus for this outcome is on ensuring healthy development for all children and youth, including those who are members of vulnerable groups. In Waterloo Region, through the leadership of the Crime Prevention Council and Public Health, definitions of health acknowledge the central role played by social determinants like income and social integration in the promotion of health and prevention of disease. Relationships, family dynamics and social/emotional competencies are also recognized as important factors in healthy child and youth development.

Rationale: Recent local reports have identified risk factors for children and youth including obesity, poverty, homelessness, low levels of literacy, and mental health (Alliance for Children and Youth, 2009). These same issues were recently flagged at a national level as key priorities for advancing the health of children and youth (Leitch, 2007). A recent local study by Population Health Research Group (2007) explores increasing childhood obesity as a risk factor for a quarter of children in grade six. Bullying in elementary school has also been identified as an important challenge in local reports (Region of Waterloo Public Health, 2004a). In the same year, the Region of Waterloo identified the preventative value of access to sport and recreation programs for children and youth (Region of Waterloo Social Services, 2004)

A recent local report calculated the proportion of children under the age of 14 who live below the low-income cut-off as 12.6% in 2006 (Region of Waterloo Public Health, 2010). The same report indicated that 15.1% of youth aged 15 to 24 lived in poverty in 2006. The proportion of local children in the region who live in poverty dropped somewhat between 1996 and 2006 (Region of Waterloo Public Health, 2010).

In 2010, the Federation of Canadian Municipalities compared access to recreational facilities in 20 Canadian communities. Proportionally, Waterloo Region is slightly above average in terms of the number of indoor pools, outdoor pools, and outdoor sports fields. It is well above average in terms of the number of arenas and ice rinks.

During the consultations that informed the development of these long-term outcomes, participants identified children's mental health in particular as an area in need of attention. Lack of front-line workers, challenges in identifying youth with invisible needs, and lack of funding for services that ease the transition from youth to adulthood were discussed.

United Way Scope of Investment: United Way supports services that address the social determinants of health that relate to social environment, personal health practices, coping skills and child development, thus enabling health and well-being among all children and youth. United Ways does not support services that deliver primary health care.

COMMUNITY PRIORITY #2: *All Families are Strong*

THE FAMILY IS ONE OF THE MOST IMPORTANT and basic units of every society. Strong families are characterized by resilience in the face of stressors, a high degree of caring and mutual support amongst members, low incidence of violence, high economic security, low divorce/separation rate, and high involvement in community affairs. For the purposes of United Way community priorities and long-term outcomes, “family” is broadly defined – families are multigenerational, diverse, often extended, and reflect a range of roles and living arrangements.

The Social Planning Council of Cambridge and North Dumfries recently reported that families in that community are becoming smaller and more diverse over time (2009). There are more young adults choosing to live with their parents. Nationwide the Canadian population is getting older and many family members are part of the “sandwich generation”, where care giving roles in the home are in relation to both children and elderly family members.

The 2nd Edition of *A Community Fit for Children* (Tardiff, 2009) draws on multiple data sources to support the conclusion that many parents in Waterloo Region are engaging in positive parenting practices and building strong bonds with their young children. This same report underscores the importance of a number of other factors that promote strong families, including family friendly workplace policies and engaged fathers. It suggests that many local workplaces do not have family friendly policies, and that use of parent support programs is generally low. Civic engagement, which this report saw as an important contributor to family health, was found to vary by neighbourhood across the region.

According to the census, 58,250 residents of Waterloo Region (or 13.3% of the total population) provided unpaid care or assistance to seniors in 2006. This was slightly lower than the provincial average of 14.4%. Thirty-one percent of residents in the Region provided unpaid child care in 2006, which was very close to the provincial average of 30.2%.

The Federation of Canadian Municipalities (2010) found that access to licensed child care in Waterloo Region improved slightly between 2001 and 2006 (from approximately 1 space per 12 children 0-12 to 1 space per 11 children). During the same 5 year period, the number of subsidized spaces available to low-income families in the Region also increased slightly (FCM, 2010).

Child care programs, care for older family members, and care for family members with complex needs and associated supports provide families with the resources and the support to nurture their children’s healthy development. The Best Start Plan (Region of Waterloo Social Services, 2007a; Region of Waterloo, 2006a) presents a clear vision for a more integrated system of supports that will serve the needs of all local families. It calls for outreach, and for unique approaches adapted to the needs of specific communities.

Table 3. Selected Census Indicators

	% of residents providing unpaid child care	% of residents providing unpaid care to an elder	Lone-parent families as a % of all census families
Waterloo Region	31%	13.3%	14.46%
Cambridge	33.2%	13.0%	15.61%
Kitchener	30.7%	13.0%	16.36%
Waterloo	31.1%	14.1%	12.79%
Wellesley	35.7%	14.4%	5.5%
North Dumfries	35.6%	16.2%	7.6%
Wilmot	31.5%	16.6%	8.5%
Woolwich	31.7%	16.9%	8.4%
Ontario	30.2%	14.4%	15.80%

2.1 Families are free from violence

Explanation: This long-term outcome focuses on preventing violence as well as dealing with its effects. Violence is defined broadly to include all types of family and gender-based violence as well as bullying and violent crime. Women, including Native women and women with disabilities, and older adults are disproportionately victims of family violence (Statistics Canada, 2005).

Rationale: Waterloo Regional Police Service (2008) responded to an average of 15.4 domestic dispute calls each day in 2008, making this type of call one of the top ten reasons the police are called. Family violence is closely tied to root causes including poverty, parenting stress, and dysfunction in the parents' family of origin. Breaking the cycle of abuse, while understanding the need for more comprehensive family supports, is a key strategy. Region of Waterloo (2007) identifies the need to break the inter-generational cycle of abuse. Families affected by domestic violence, for example, often struggle with challenges related to housing or to child welfare (CREHS, 2007). In their study of homelessness, Tyler & Johnson (2006) observed that one-third of youth experiencing homelessness have suffered sexual abuse and half have suffered either physical abuse or neglect in the home. The same report found that early life experiences are contributing factors to homelessness. Abuse within the home, parental substance use, poverty, divorce, and blended family situations were identified as predictors of youth leaving home.

Recent local research found that rates of violent crime in Waterloo Region (including all types of violent crime, not just those related to families) are lower than might be expected for a community of this size and economic health (Crime Prevention Council, 2008).

United Way Scope of Investment: In Waterloo Region, there is a strong consensus that addressing family violence requires a “family systems approach” to address the underlying causes of violence in a coordinated way (Family Violence Prevention Project, 2010). Consequently, United Ways in Waterloo Region support a wide range of reactive and preventative efforts that address family violence.

This long-term outcome is included here because interventions designed to build strong families often address issues of family violence. A similar outcome exists within the community priority *All Children and Youth Reach their Potential*. This outcome (*Children and youth are free from abuse and neglect*) may be more appropriate for programs that are dealing with violence in the context of efforts designed primarily to help children and youth reach their potential.

2.2 Families are resilient and supported by their community

Explanation: Resilience refers to the capacity of a family to weather the challenges that they may face in the future. Resilient families are those with the knowledge, skill, social connections and resources to manage stressors successfully. Families that are supported by their community are not isolated, and consequently they are proactively engaged by community systems. They have strong social connections, and ongoing and ready access to the informal and formal supports they need to thrive. All families, regardless of their current situation, can benefit from supports designed to increase their resilience. This long-term outcome is one that can be addressed by a wide range of services aimed at many different types of families in the region, and especially by universal interventions.

Rationale: Prevention and capacity building services are key to the long-term strength and health of families and communities. While it is important to address extant social problems, it is also important to invest in building strength for the future. Local research (Region of Waterloo Social Services, 2007c) has confirmed that families in Waterloo Region value their sense of connectedness to community. The same report found that younger adults, people new to their community, and people with lower levels of education tend to feel less connected to their communities than other populations. The Best Start community plan calls for community hubs, based in schools and neighbourhoods, that provide convenient access to child care, parent training, family support, and early intervention services (Region of Waterloo Social Services, 2007a).

The Best Start Plan (2007a) calls for the development of outreach and implementation strategies that make sense for specific groups of families (including rural, francophone, Aboriginal, and ethno-cultural minority families). Families that differ in structure from the stereotypical nuclear family (i.e., extended families, single parent or grandparent run families, or gay or lesbian families) might also be added to this list. Unfortunately, there are no readily available data related to parenting practices and parent well-being in Waterloo Region. This is a significant gap in information given that we know family has the most influence on child development (Hoy and Ikavalko, 2005).

Participants in local consultations identified chronic family breakdown as a risk factor in the region, and talked about strategies to prevent this deterioration.

United Way Scope of Investment: United Ways in Waterloo Region support programs and services that build the resilience and capacity of family systems, through interventions aimed at factors such as parenting, conflict management, or anti-violence. Community development and outreach efforts that strengthen the social supports and other assets of families are also important.

2.3 Families with complex needs are supported

Explanation: Families with complex needs include families supporting vulnerable family members and those caring for an individual with a disability or for an older adult. Often, the support needs of individuals have as much to do with the strength of their social network and their socio-economic context as they do with the medical aspects of their condition. The complexity of their situation can arise from problems with the design of the service system, and not solely from characteristics of the individual or the family.

Rationale: Several local reports have identified the need for a more coordinated approach to family services, especially for those families with complex needs (CREHS, 2002). For example, a recent study of the service system for people with autism in Waterloo Region (CCBR, 2008) found that the system is complex and fragmented. This is especially true for children who have more than one diagnosis or an inconclusive diagnosis. This report identified a need for more respite, awareness raising among doctors and other gatekeepers, more supports for caregivers, and more assistance navigating the system of supports. Similar challenges exist for families seeking developmental or children's mental health services.

The Social Planning Council of Cambridge and North Dumfries has documented a steady growth in the number of seniors in Cambridge between 1996 and 2006. This same report also identifies an increase in demand for transportation services for seniors in the last 5 years (SPCCND, 2009).

In United Way consultations, some local stakeholders highlighted the linkage between families with complex needs and social/economic factors such as housing and homelessness.

United Way Scope of Investment: United Ways in Waterloo Region support services that build strong, healthy relationships and coping mechanisms within families that are under stress due to care giving responsibilities. Examples may include supports designed to help families navigate service systems, holistic supports to the family unit, and coordinated supports and opportunities.

COMMUNITY PRIORITY #3: *All Neighbourhoods are Inclusive and Thriving*

NEIGHBOURHOODS CAN BE UNDERSTOOD as networks of informal support between neighbours. When these networks are dense and healthy, the capacity for neighbourhoods to care for their members is immense. Neighbourhoods are considered to be inclusive if people have a sense of belonging to the community and if all community members share this sense. Inclusive neighbourhoods are characterized by trust among members, and by a high degree of organization and capacity to solve local problems. Rural communities are important in much the same way. This community priority is meant to encompass support and development of all small, interdependent and geographically-defined communities.

Table 4. Selected Census Indicators: Tenure at Current Address and Population Growth

	% of population who have lived at current address for 5 years or more	Population growth 2001-2006
Waterloo Region	55.69%	+9%
Cambridge	56.10%	+9.1%
Kitchener	52.83%	+7.5%
Waterloo	52.71%	+12.6%
Wellesley	78%	+4.5%
North Dumfries	69.6%	+3.4%
Wilmot	63.9%	+15%
Woolwich	70.8%	+8.0%
Ontario	58.66%	+6.6%

Based on the literature and recent studies, the following long-term outcomes have been identified with regards to neighbourhoods:

3.1 Neighbourhoods have inclusive and safe gathering places

Explanation: Gathering places include physical locations such as community centres, as well as interventions that provide neighbourhood residents with an opportunity to interact, provide one another with informal support and build relationships. By this definition, gathering places may include barbecues, committees, gardens or fairs. These gathering places and events are inclusive when they involve residents of all ages and backgrounds. Community or neighbourhood hub models, in which multiple services and community events are co-located, serve as accessible gathering spaces while also improving service integration. These hubs have become centrally important to both urban and rural communities.

Rationale: Social inclusion significantly contributes to public safety and security for everyone (Community Safety and Crime Prevention Council, 2007). People who feel stigmatized experience significant barriers to being part of their community. This may in turn lead to difficulties in finding appropriate supports and may even increase the risk of victimization or involvement in crime (Community Safety and Crime Prevention Council, 2007).

When people do not know their neighbours, it can lead to distrust, disrespect, stereotyping, miscommunication, and increased conflict (Maan Miedema & Vandebelt, 2006). There are positive outcomes that result from knowing your neighbours. In Cambridge, a recent report reviewed levels of volunteerism, voter turnout, and charitable donations, and found that citizens are very engaged (SPCCND, 2009). Although city or region-wide public education through information campaigns can effectively increase individual and community knowledge about the issues of access, equity and social exclusion (Region of Waterloo, 2006c), social capital theory (e.g., Putnam, 2000) tells us that this type of shared understanding is easier to achieve when working on a smaller scale at a neighbourhood level.

Inclusive gathering spaces are important in rural neighbourhoods as well. Local research (Region of Waterloo Social Services, 2007c) has found that residents in the rural parts of the region may be drawn to neighbourhood gathering places for different reasons. This study found that people in selected rural neighbourhoods cared a great deal about peaceful, quiet neighbourhoods and friendly people, while residents from urban neighbourhoods reported that they enjoyed access to amenities.

United Way Scope of Investment: While United Ways do not fund the capital costs involved in creating physical gathering spaces, they do invest in efforts that bring neighbours together in order to build the social infrastructure of neighbourhoods.

3.2 Neighbourhoods have strong, accessible supports and services

Explanation: Supports and services include more formal services such as job training, recreation, parent education, counseling, or homework support for youth. These types of service can be made available at a neighbourhood level in a variety of ways. A partnership might be formed between a regional agency and a local neighbourhood centre. An agency active throughout the city or region might engage in street outreach or community development work in order to improve the social infrastructure in a specific neighbourhood. A volunteer-run organization may develop an innovative new program in response to the unique needs of the neighbourhood in which they live. Whatever the means, neighbourhood-based supports and services are customized to the needs of local residents.

Rationale: On numerous occasions over the last several years, local reports have identified neighbourhood-based services and supports as an important outreach and engagement strategy for a wide range of service providers (Region of Waterloo Public Health, 2003). Events, networking opportunities and resources are more accessible when they are located in the neighbourhoods where people live and delivered in a way that fits the needs and capitalizes on the strengths of those neighbourhoods. Although local neighbourhood-based services have some documented success in connecting isolated people to services, several reports have acknowledged that much more outreach work could be done at a neighbourhood level (Crime Prevention Council, 2007; CREHS, 2003).

Municipalities, organizations and community members can work together in partnership to include everyone by reaching out to people “on the edge” of our communities to develop lasting solutions. Organizations based in neighbourhoods such as community centres or resident associations can be hubs for the provision of many kinds of support if they have strong partnerships, adequate resources, a clear vision and strong leadership. Region of Waterloo Social Services (2007d) has also pointed out that many residents of the region travel by car to access amenities, and that this lifestyle brings with it a variety of health risks. Improving the supports available at a neighbourhood level provides people an opportunity to reduce their commuting.

Local residents surveyed by Stats Canada (Region of Waterloo, 2007c) talked about the importance of easy access to services. Parents with children, in particular, reported that they feel more connected to their neighbourhoods when activities and sports are available nearby.

Local neighbourhood organizations have repeatedly expressed concern that their mandates are expanding without proportional increases in funding and other kinds of support (CREHS, 2002; Crime Prevention Council, 2007). Facilities and staffing at these organizations are often underfunded. For this reason, neighbourhood-based services are often not as strong as they should be. They are vulnerable to cuts in funding or other forces that threaten the sustainability of local service delivery infrastructure.

United Way Scope of Investment: Local United Ways invest in neighbourhood-based supports and services that are explicitly designed to address local needs and build the capacity and social infrastructure of those neighbourhoods. In particular, these services are made more accessible to residents who might otherwise face barriers to accessing more centralized services.

3.3 Neighbourhoods have diverse groups that are connected and working together to take action

Explanation: Connections among neighbours can lead people to coordinate their individual efforts and develop innovative ways to address common concerns or goals. Concrete ideas and actions are often more successful and effective when they emerge out of the experience of residents, when they are expressed by residents and when they are the product of different groups working together for the benefit of all. Taking action refers to implementation of concrete ideas for neighbourhood improvement. Neighbourhood improvements could include broad-based outreach and organizing to advocate for local needs, neighbours participating in the development and delivery of programs, neighbourhood enhancement projects, or development of partnerships with local businesses or schools.

Rationale: The role of strong neighbourhoods and communities in building the region’s social capital is beginning to be acknowledged (Region of Waterloo Public Health, 2006f; 2004c). Social

capital gives individuals the assets to participate in communities (Hoy and Ikavalko, 2005). The literature on comprehensive community initiatives and locality development makes it very clear that neighbourhood-based efforts are a good way to meet the needs of a diverse and growing population (Paul Born, 2009). By working together, community members are mobilized, residents can build on local skills and services can complement these efforts towards creating safer neighbourhoods (Community Safety and Crime Prevention Council, 2007).

United Way Scope of Investment: United Ways in Waterloo Region support services that facilitate coordination and cooperation among people and organizations within a neighbourhood for mutual benefit. This may involve support for community development or animation, a planning process, community engagement or civic participation.

COMMUNITY PRIORITY #4: *All Newcomers are Welcomed and Supported*

THE NEEDS OF NEWCOMERS to Waterloo Region are an increasingly important priority for social investment. According to Canada’s 2006 Census, the immigrant population makes up 22.3% of the total population of Waterloo Region (105, 375 individuals). Within the Region, Kitchener continues to welcome a greater proportion of immigrants and refugees than either Waterloo or Cambridge.

Table 5. Selected Census Indicators: Immigration

	% of population who are immigrants	% of population who immigrated between 2001 & 2006
Waterloo Region	22.27%	3.60%
Cambridge	21.12%	2.45%
Kitchener	26.38%	4.59%
Waterloo	22.71%	4.63%
North Dumfries	8.8%	1.1%
Wellesley	6.1%	1.0%
Wilmot	10.1%	0.2%
Woolwich	7.5%	0.3%
Ontario	28.26%	4.8%

Between the 2001 and 2006 Census, 17,020 individuals immigrated to this region. This increase reflects a growth rate over 13%, which is double the growth rate of non-immigrants in the same period. The Census data also show that the recent immigrant population in Waterloo Region is younger than the region’s population as a whole, with close to half between the ages of 25 and 54. Recent research by the Centre for Community Based Research concluded that refugees face unique challenges connected to discrimination, lack of trust in service providers, and rules that do not allow refugees to access some of the supports available to other immigrants (CCBR, 2010).

In 2009, the Federation of Canadian Municipalities rated how well recent immigrants were doing in twenty major Canadian communities, including Waterloo Region (FCM, 2009). With respect to home ownership, unemployment, and proportion of people living with low incomes, immigrants in Waterloo Region are catching up with non-immigrants, and doing somewhat better than immigrants in many other Canadian cities. However, in Waterloo Region and in the rest of the country, recent immigrants are still falling behind in terms of average income. The affordability of housing is a bigger challenge for immigrants in Waterloo Region than it is for their counterparts in other Canadian cities.

The FCM report also includes estimates of the number of immigrants who move from one Canadian community to another after arriving. FCM estimates that Waterloo Region's net gain of immigrants between 2001 and 2006 (including both primary and secondary immigration) was almost 25%. This made Waterloo Region's net immigrant growth rate one of the highest of the 20 participating communities (exceeded only by Sudbury and Laval). Interestingly, Vancouver, Ottawa and Toronto all had a net loss of immigrants between 2001 and 2006 using this method of estimation.

In 2004, Region of Waterloo Public Health released a report that indicated newcomers/immigrants in the region faced challenges (Region of Waterloo Public Health, 2004c). We know from research studies and from experience that immigrants and refugees are more likely to succeed when they have sense of connection to the community in which they live, when they have enough income to support their families, and when they do not face implicit or explicit discrimination.

The following long-term outcomes have been identified with regards to Newcomers:

4.1 Newcomers are meaningfully employed

Explanation: This outcome is focused on ensuring that immigrants and refugees to Waterloo Region are not excluded from meaningful employment. Meaningful employment is employment that the individual sees as fitting with their skills and interests, enabling the individual and his or her family to live a stable, healthy lifestyle.

Rationale: Employment is a key factor in community integration and quality of life. Of all Waterloo residents living below the poverty line, 40% are recent immigrants (Family Health Human Services Planning, cited in Jaffer, 2006). Over 33% of recent immigrants in Waterloo Region were low income in 2000 compared to less than 10% of Canadian-born individuals (Statistics Canada as cited in CREHS, 2005). Recent immigrants to the region are receiving approximately 41% to 54% less income than their Canadian-born counterparts with the same level of education. (Workforce Planning Board of Waterloo Wellington Dufferin, 2009). Many immigrants work in jobs that only provide income to meet basic needs and do not allow them to use the skills in which they were trained (Jaffer, 2006). In the region, 70% of immigrants reported difficulty seeking employment due to issues related to transferring foreign qualifications, lack of networks or contacts, and language barriers (Maan, Miedema & Vandebelt, 2006). Many newcomers lack occupation-specific language skills (CREHS, 2005). Interpreter services can be difficult to access. Some newcomers face additional challenges when they are illiterate in their native language.

United Way Scope of Investment: The United Ways in Waterloo Region do not directly create jobs for immigrants and refugees. They do fund programs and services that contribute in a variety of ways to increasing the numbers of immigrants and refugees who have meaningful employment.

These programs may contribute to this outcome in a variety of ways, including but not limited to increasing job search skills, improving employment networks, overcoming language barriers, managing stress due to poverty or unemployment, or enabling immigrants and refugees to transfer qualifications.

This long-term outcome is closely related to another in the “All People Are Economically Secure” community priority that states: “people have sufficient and stable employment.” This outcome is aimed primarily at the unique obstacles to employment faced by immigrants (like those listed in this section). Some of these unique challenges focus on obtaining employment that is meaningful (i.e., commensurate with training). The long-term outcome listed under the “People are Economically Secure” Community priority (“sufficient and stable employment”) is intended to address obstacles to employment that affect everyone, and that relate more broadly to stability and adequacy of income. Programs in this second category may assist people to obtain meaningful employment, but the primary consideration is whether employment leverages greater economic security.

4.2 The community is inclusive and newcomers are free from discrimination

Explanation: This long-term outcome focuses on overcoming the barriers that marginalize immigrants and refugees and exclude them from the community. Strategies to overcome discrimination can include making positive changes in the knowledge, attitudes and behaviours of other community members and in the practices of community services that contribute to exclusion and discrimination. More inclusive policies, practices, attitudes and behaviours are necessary if immigrants and refugees are to be welcomed and supported.

Rationale: Despite the progress made in recent years, local research suggests that racism, systematic discrimination and exclusion are still important issues. A recent Cambridge survey found that almost 30% of newcomers accessing services reported experiencing some form of discrimination in Canada—most often employment related (Maan, Miedema & Vandebelt, 2006). Another local study concluded that employers should be encouraged to reflect on their practices as well as to connect with diversity and organizational change services, and that the community as a whole needs to become more informed about the contributions of newcomers (CREHS, 2005).

Recently, local consultations with immigrants and service providers were conducted as part of the planning process for a local immigration partnership (CCBR, 2010). These consultations identified a number of ways in which the region is doing well with respect to integration of newcomers. Policies of city governments, ethno-cultural associations and cultural festivals, volunteer work by immigrants and refugees, and programs at community centres were all cited as positive influences. At the same time, this report concluded that a lack of resources, lack of training, poor information dissemination practices, and other obstacles continue to inhibit community integration for newcomers.

United Way Scope of Investment: Although United Way acknowledges that all universal programs and services are working to remove barriers to access, this long-term outcome is intended to address the need for more focused strategies designed to make the community more inclusive. These more focused efforts may be designed to alter attitudes of community members, improve the skills of service providers, or address significant barriers that immigrants face in attempting to access services or participate in the community. Examples may include increased awareness among the general population about the challenges faced and contributions made by immigrants and refugees, and changes in discriminatory practices.

4.3 Newcomers are involved in and have a voice in community settings

Explanation: Immigrants and refugees need to be active participants in the dialogue that takes place in community settings, so that their ideas, opinions and interests are considered. For the purposes of United Way investment, community settings are understood as broadly as possible, to include volunteer opportunities, recreational activities, resident consultations, and political processes as well as geographical settings such as community centres, schools, or libraries.

Rationale: Local research (Region of Waterloo Social Services, 2007c) has found that residents who are new to their neighbourhoods (less than 5 years) tend to feel less connected to the community.

Immigrants and refugees to Waterloo Region ought to be active participants in all spheres of community life, including cultural, recreational, and political processes as well as social services. Initiatives designed to support a more welcoming and inclusive community ought to engage newcomers as active partners in the process and enable newcomers to participate fully in the life of the community. When community engagement processes change, local cultures and attitudes may also change, and this process may have far-reaching effects for a wide variety of programs and services.

United Way Scope of Investment: Local United Ways support building the capacity of organizations and community groups to engage immigrants and refugees in community settings; for example, as volunteers, board members, or participants in community consultations and planning processes. United Ways also support initiatives that enable newcomers to initiate, build, or engage in networks, connections and partnerships that enable more active participation.

COMMUNITY PRIORITY #5: *All People Are Economically Secure*

WHEN PEOPLE ARE ECONOMICALLY INSECURE, they lack access to basic needs, such as shelter, food, and clothing. Building economic security requires enabling people to meet such needs through practical supports, training, education, and employment supports. During the consultations that led to the identification of long-term outcomes, local stakeholders identified wages, employment, and education as key factors in economic security. When people are not economically secure, their capacity to participate in community life is reduced, and isolation often results.

Table 6. Selected Census Indicators: Family Income

	Median after tax income for all census families in 2005	Median after tax income for lone-parent families	% of total population with low income after tax
Waterloo Region	\$62,819.00	\$37,478.00	7.5%
Cambridge	\$61,351.00	\$35,382.00	7.1%
Kitchener	\$58,493.00	\$36,675.00	8.7%
Waterloo	\$70,892.00	\$41,258.00	8.1%
North Dumfries	\$69,007.00	\$37,441.00	4.1%
Wellesley	\$62,729.00	\$37,495.00	3.8%
Wilmot	\$62,857.00	\$39,584.00	2.8%
Woolwich	\$65,565.00	\$49,156.00	2.6%
Ontario	\$52,117.00	\$35,677.00	11.1%

The number of people who live in poverty in Waterloo Region is lower than most other communities in Ontario; however, one local report stated that, in 2006, 3.5% of local residents with full-time employment lived below the poverty line (Region of Waterloo Public Health, 2010). In 2003, Opportunities Waterloo Region estimated that there were 24,390 households in the Region of Waterloo living below the Low Income Cut-off (LICO), and that there were 17,000 adults in the region who were “working poor” (Opportunities Waterloo Region, 2003). In addition, some groups

of people are more likely to live in poverty than others (i.e. recent immigrants, young adults, Aboriginal people, rural residents, lone parents, and women with children) within Waterloo Region (Region of Waterloo Public Health, 2010).

According to the Quality of Life Report (Federation of Canadian Municipalities, 2004) an important factor in measuring quality of life is the extent to which the benefits of income growth and employment are shared equally. This growing gap between rich and the poor will marginalize low income people and can lead to societal unrest. The federation of Canadian Municipalities (2010) recently reported that the income gap between Waterloo Region's richest residents and poorest residents grew a little bit between 2001 and 2006, while remaining slightly below the national average. During the same period of time, the percentage of families in Waterloo Region that were classified as working poor also grew - to more than 6%. The poorest 10% of Ontario's population has negative wealth—that is, their debts are greater than their assets. The second poorest 10% have average family wealth of only \$3,700. Both of these groups became poorer over the previous 10 years while those at the top became richer (Ginsler & Associates Inc, 2006).

Low income is associated with lower birth weight, poorer health, poorer academic achievement, a lower chance of high school completion, lower adult employment and poorer quality of life (Shonkoof & Phillips, 2001 cited in Hoy and Ikavalko, 2005).

In Waterloo Region, Kitchener has the highest proportion of people living in poverty (see above table). This statistic however, does not fully capture important geographical differences in the nature of poverty. Cambridge, for example, has more single-parent families living in poverty than either Waterloo or Kitchener.

According to participants in United Way consultations, negative attitudes towards people living in poverty in the region are deeply embedded. Ongoing efforts to challenge stereotypes are seen as key steps in making progress in this community.

In order to improve the economic security for people in Waterloo Region, local United Ways intend to invest in programs and services that help to achieve one or more of three key long-term outcomes.

5.1 Education, training, and learning opportunities are affordable and accessible to all

Explanation: Education, training and learning opportunities include formal schooling as well as the type of applied learning that can take place in employment support programs, apprenticeships, or on-the job training. These opportunities need to be made available to people of all ages, cultures and situations. Inability to access education, training and learning opportunities is a major obstacle to overcoming economic insecurity. Of particular concern are obstacles that prevent people from achieving literacy.

Rationale: Although poverty is in every way a systemic issue, local reports do identify several specific areas in which training or capacity building for individuals living in poverty is needed (see, for example, OP Waterloo Region's work on Sustainable Livelihoods approaches). One of the obstacles facing people who experience economic insecurity is lack of skills and education (lack of human capital) to get employment or to engage in other sustainable economic activity. In the Waterloo Region approximately 22% of residents age twenty and older have not attained a high school diploma (Regional Municipality of Waterloo, 2006). Grade 12 minimum is still a prerequisite for most employers (Region of Waterloo Social Services, 2007a).

United Way Scope of Investment: The reasons for economic insecurity are complex and individualized – as a result, capacity building strategies are likely to be different for different populations (e.g. newcomers, women, youth, farmers). In addition to supporting a wide range of mainstream educational and learning programs, United Way is also interested in the learning that can be accessed through interventions aimed at specific groups. United Ways supports a diverse range of learning opportunities, including (for example) efforts related to employment and pre-employment training, on-the-job skills building and literacy.

5.2 People have sufficient and stable employment

Explanation: Sufficient employment is employment that delivers a living wage, enables the individual and his or her family to live a stable, healthy lifestyle and that constitutes a secure attachment to the workforce.

Rationale: Interventions designed to improve the training and skills of vulnerable individuals are not enough, on their own, to ensure economic security. Employment is key to economic security, and even highly skilled people face obstacles to employment. Access to employment is not always equitable. Although Waterloo Region’s unemployment rate in 2006 was about 5.5%, the Federation of Canadian Municipalities (2010) recently found higher unemployment rates among aboriginal residents of Waterloo Region (10%) recent immigrants (10%) and people with activity difficulties or limitations (7%). Because local United Ways employ a social determinants approach, they recognize that all community members have a role to play in creating the kind of supportive, inclusive environment that will help to improve the economic security of vulnerable citizens.

The Social Planning Council in Cambridge (2009) has documented a shift in the local labour market away from stable manufacturing jobs and towards part-time, seasonal work. 2008, for example, saw the closure of 20 manufacturing companies in the city. This report predicts a continued shift towards less secure, more precarious work in the coming years.

United Way Scope of Investment: There are a number of obstacles that get in the way of access to employment. Locally, input provided to the United Ways has suggested that there is a need for supports that address the subtle, social obstacles to employment. Supports to reach sustainable employment may include services for people who are underemployed or job search supports (i.e., interview and resume coaching, access to a computer or a phone). They might also include efforts to educate the community about (for example) the value of investments in public transit, child care, or living wage policies. If services to support employment are designed specifically for immigrants and refugees, they may link more directly to the United Way community priority: *All Newcomers Are Welcome and Supported*, and the long-term outcome: *Newcomers are meaningfully employed*.

5.3 People have their basic needs met

Explanation: Basic needs refer to the needs of all people for food, housing, income and safety. It is not always fair or appropriate to expect that employment income will be the only means through which people meet their basic needs. Basic need supports provide practical, immediate assistance to people in order to enable them to meet these needs.

Rationale: Many local reports (Hoy and Ikavalko, 2005; CREHS 2006a, Ginsler, 2006) have identified the need for improvements in those services that provide for the most basic needs of

people living in poverty: food, shelter, safety, and employment/income. Forty five percent of low income households in Waterloo Region experience some degree of food insecurity (Region of Waterloo Social Services et al., 2006). Using a market basket measure, the Federation of Canadian Municipalities (2010) recently calculated that welfare income in Waterloo Region in 2006 provided 50% of the resources needed to meet basic needs. This percentage had dropped from 55% in 2001. A recent review of emergency food distribution in the region found that one of the contributing conditions for people accessing food assistance was family break-up (Region of Waterloo Social Services et al, 2006).

Since 2006, changes in the economy have made people living in poverty more vulnerable. During this time period, there has been a steady rise in the number of applicants for Ontario Works and ODSP in Cambridge and an increase in demand for emergency food services (SPCCND, 2009). The gap between those living with low incomes and the average income in the region increased between 1996 and 2006 (Region of Waterloo Public Health, 2010).

In 2005, thirty-six percent of households in rental dwellings and 14% in owned dwellings were paying more than 30% of their gross monthly income towards shelter (Region of Waterloo Social Services, 2005a cited in Hoy and Ikavalko 2005).

United Way Scope of Investment: United Ways in Waterloo Region support programs designed to meet the basic needs of people living in poverty for food, shelter and safety. United Ways do not provide capital to build housing.

GLOSSARY

Community Integration – Community integration is the opportunity to live in the community and be valued for one’s uniqueness and abilities, like everyone else. (Salzer, 2006).

Community Priorities are broad domains within which both local United Ways are investing for change. Within each of the five community priorities, there are three long-term outcomes.

Economic or Independent Immigrants: people with special skills or experience that are transferable to the Canadian labour market, with or without sponsor.

Family Class immigrants: people that have a close family member (s) in Canada who have agreed to provide care and shelter. (Understanding Homelessness and Housing Stability Experienced by Adults in Waterloo Region’s Urban Areas)

Food Security – a situation where all people at all times have physical, reliable, and sufficient economic access in a dignified way to nutritious, culturally acceptable, safe food for a healthy life through a sustainable food system. Low income families generally have problems in securing enough and adequate food for their children and other family members (Region of Waterloo Social Services 2006).

Immigrant Generations – First generation are individuals who were born outside of Canada; Second generation individuals are those born in Canada with at least one parent who was born outside of Canada.

Long-term Outcomes are statements that identify the specific, measurable types of community change that United Ways are actively working towards.

Low birth Weight – the number of babies born that weigh less than 2,500 grams per 1,000 live births.

Low Income – generally defined as those who must spend a large proportion of their income for the basic necessities of life, such as food and shelter (Regional Municipality of Waterloo, 2006). In its report *Urban Poverty in Canada: A Statistical Profile*, the Canadian Council on Social Development (CCSD) used the measurement of Statistics Canada’s Low Income Cut-off (LICO) as an indicator of poverty.

Low Income Cut-off (LICO) – income levels at which families or unattached individuals spend 20% more than average on food, shelter and clothing. LICO’s are set according to the proportion of annual family income that is spent on food, shelter and clothing. An additional 20% is added to the LICO to include other expenses such as heat, hydro, telephone and prescription medication. LICO accommodates different sized households and different sized communities. Cut-offs are adjusted to reflect recent family spending patterns as reflected in the Consumer Price Index, which takes prices changes into account (Region of Waterloo Social Services et al, 2006).

Meaningful Employment – has been characterized as employment that provides regular activity, social contact and affiliation, collective effort and purpose and links individuals to goals and purposes (Drake et al. 1996)

Newcomer – Citizenship and Immigration Canada usually characterizes a newcomer as someone who has been in the country for five years or less (Caidi & Allard, 2005).

Refugee - person who seeks protection in Canada, who may or may not be sponsored by the government in advance of their arrival.

Social Capital - features of social organization such as networks, norms and social trust that facilitate coordination and cooperation for mutual benefit. It is the connections that an individual has to other community members (Putnam, 1995).

Youth – for the purposes of this document, youth refers to anyone up to the age of 25

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