

Community-Based Research Showcase – November 14, 2014

Session Descriptions

Session 1: Social Inclusion

1. The Development and Implementation of the Saskatchewan Indigenous Strategy on HIV and AIDS (SISHA). *Margaret Poitras, All Nations Hope Network, and Merv Thomas, consultant*

Indigenous Peoples within Saskatchewan are experiencing HIV and AIDS at alarming rates and are bearing the major burden of this chronic illness and there must be a coordinated response to combat this trend. This presentation will show how Saskatchewan Indigenous Council on HIV and AIDS was formed and is comprised of experts working within the field of HIV and AIDS as well as Aboriginal People Living with HIV. This council is tasked to oversee and guide the development and implementation of the strategy over the next five years.

The SISHA will need the support of all stakeholders, including governments at all levels, Federal, Provincial and local, Indigenous leadership within Saskatchewan, front line health and social service providers, Aboriginal People Living with HIV and AIDS (APHAs), Indigenous communities both on and off reserve, AIDS service organizations and Friendship Centres.

There are 7 strategic priorities identified and they are as follows: 1) Indigenous Knowledge, language, culture and ceremony, 2) Capacity Building, 3) Prevention Education and Awareness, 4) Partnerships, Collaboration and Sustainability, 5) Ensure APHA access to cultural continuum of care, treatment and support, 6) Harm Reduction, and 7) Indigenous HIV and research. SISHA will be released on December 1st, 2014 in Regina, at the national launch of Aboriginal AIDS Awareness Week.

2. How to Transition Unemployed and Marginalized Individuals with Low Levels of Education and Minimal Work Experience into Successful Employment. *Murray Giesbrecht, ACERT*

In 2010, the Adult Centre for Employment Readiness and Training (ACERT) investigated this question with the intention of developing and implementing a project for members of our community based on the findings. What resulted was a three year innovative program that was built upon a dynamic partnership between government, industry, and community based training initiatives. Thus the Safeway Career Development Program was born. The focus of the program was to provide instruction, supports, and services that would develop the essential skills and provide labour market attachment for unemployed adults, and to increase opportunities for Canada Safeway Ltd to develop the skilled workers they need to maintain and expand their business. In 2012, ACERT along with Canada Safeway was presented with the award for Workplace Literacy Program of the Year at the annual Lieutenant Governor's Saskatchewan Literacy Awards of Merit. The project concluded in 2013, and therefore the information presented will be completed research.

What we present will include:

1. How the project was researched and developed. (How the need for the project was established, how the partnerships were built, connection of community and business).
2. The ongoing research as the project was carried out.

3. The evaluation at the conclusion of the project. (The successes, the challenges, best practices, etc.)

3. A Living Wage for Regina. *Simon Enoch, Canadian Centre for Policy Alternatives, and Paul Gingrich*

This CCPA study determined that a Living Wage for a Regina family with two working parents and two children, ages four and seven, is \$16.46 per hour. This wage amounts to a family income of \$58,245 annually. To earn this amount both parents work full-time to meet the family's basic needs and avoid falling below the poverty line. A Living Wage permits families to have decent housing, transportation and nutrition while also allowing them to actively participate in community life and plan for the future. The Living Wage differs from both the minimum wage and the average wage. At minimum wage (currently \$10 per hour in Saskatchewan), with both parents working full-time, annual family income is \$34,600, a few dollars above the poverty line. Social Assistance benefits for a similar family provide under \$25,000. In contrast, in 2011 one-half of Regina families had more than \$89,000 in income. The annual income for a family with each parent earning the Living Wage is about midway between the average family and poverty level.

Our presentation will outline the key findings of our research, how we calculated the Living Wage for Regina and the benefits to both employers and communities of adopting the Living Wage model.

4. Like Any Other Job? An Analysis of Potential Changes to Canada's Prostitution Legislation. *Crystal Giesbrecht and Diane Delaney, Provincial Association of Transition Houses and Services*

With support from the Community Research Unit, PATHS conducted research into Canada's legislation on prostitution, legislation in other jurisdictions, and the impacts of prostitution on those working in prostitution as well as society in general. This research is the basis for a paper discussing potential changes to Canada's prostitution legislation, titled *Like Any Other Job? An Analysis of Potential Changes to Canada's Prostitution Legislation*. We will present an overview of our analysis and possible solutions.

Session 2: Research Requests

1. Homelessness in Regina: Factors in Effectively Addressing Homelessness. *Cora Sellers, Carmichael Outreach*

With reference to our research report, "Homelessness in Regina: Current Situation and Solutions from Other Communities" (2013), which was funded by the Community Research Unit, University of Regina, Carmichael Outreach would like to present some of the issues relating to homelessness as it exists in Regina. We will be presenting on research we have already done and addressing a problem we would like to do further research on – that is, what are some of the complex factors that need to be addressed in order to effectively address homelessness in Regina?

2. Moving Forward with the Regina Community Food Assessment (CFA). *Tracy Sanden, Community Food Systems Steering Committee*

Regina's CFA began over a year ago through a collaborative, participatory process that brought people together from all sectors of the local food system to analyze the local context; identify the assets, gaps, and priorities of the community; and develop an action plan to improve community food security. This

plan will provide concrete actions that individuals and organizations can work towards to improve food security in the Regina area.

The initial phase of the CFA was an inquiry into the local food system, through a research project resulting in the Environmental Scan and the use of focus groups to gather input from Regina's diverse population. The Environmental Scan identified a number of gaps including knowledge about indigenous food systems, culture and food, environmental impact and tracking of local foods. The focus groups identified a challenge in communicating information and access to information about local foods and local programming. This presentation and display will highlight our action plan and areas for future work and research.

Session 3: Research Requests

1. Seniors Neglect and Abuse Response Line (SNARL) Project. *Dianne Barrow, Saskatchewan Seniors Mechanism*

Between 6,148 and 15,370 Saskatchewan older adults are affected by abuse. Saskatchewan currently has no dedicated service for seniors to phone if they are victims of senior abuse or neglect or for those who suspect a senior is a victim of abuse. This creates a situation where the response to victims is fragmented, inconsistent and in some cases non-existent.

The Saskatchewan Seniors Mechanism and its project partners have received a Federal Department of Justice Victims Fund grant to test our theory that many more incidents of older adult abuse will be reported if we are able to clearly identify and publicize a place to do that reporting – a place that has the capacity to respond quickly, consistently and effectively. Mobile Crisis Services (Prince Albert, Saskatoon and Regina) has agreed to provide this service 24 hours a day, 7 days a week. We have developed a “caller response protocol” to be completed on each call received so we can collect data on who is phoning, what specific type of senior abuse is involved (financial, physical, emotional, sexual, and neglect), what was done to address the issue, if and where it was referred for action, if services were available, and any follow-up. As well, the Mobile Crisis staff will need specific training on the various dynamics of abuse of seniors and they will need this information to make referrals to local people and/or organizations in various communities throughout Saskatchewan to provide direct contact with victims.

We are currently conducting research to determine what services are available in various communities throughout Saskatchewan (urban, rural and Northern communities, men and women, people from any cultural background including Aboriginal People) to respond to referrals from Mobile Crisis Services. Services for abused seniors cross many jurisdictions, Justice and Policing, Social Services and Community-Based Organizations, and Health. Our research has shown that while there are services for victims of abuse of all the ages, the specific ways of dealing with senior abuse has been neglected. There is a lack of clear direction about where to get help regarding elder abuse at the time of crisis and where to refer individuals for follow up to address their needs.

A thorough literature review has been conducted with respect to the current theories about senior abuse and neglect; the response to senior abuse in other jurisdictions, including provincial, national and international research; and best or promising practices in the areas of prevention, intervention and response to senior abuse. Many of the Canadian provinces have legislation and/or actionable strategies,

including for example: Community Response Teams, inter-jurisdictional case management structures, multi-disciplinary geriatric health teams and older adult emergency shelters.

The Research Question and Anticipated Outcomes

The Saskatchewan Health Regions are a key component in providing services to senior victims of abuse and neglect. A clear and concise snapshot of these services will provide us with the necessary information to compare and contrast each health region's existing services, policies, procedures and practice. This research will inform the SNARL project of existing gaps or inconsistencies in services provided by each health region and will assist Mobile Crisis Services and other CBOs, Health, Justice and Saskatchewan communities in the formation of collaborative Seniors Neglect and Abuse response teams.

- What specific services do the Saskatchewan Health Regions provide to older adult victims of abuse and neglect? Do the Health Regions have policy and procedures relating to the treatment, victim support and reporting of Senior Abuse?
- What do the Health Regions do when they encounter senior abuse and do not have the capacity to respond effectively?
- What specific services and follow-up do the Health Regions provide upon discharge of a senior victim of abuse?

2. A Holistic Approach to Understanding and Addressing Key Barriers to Educational and Employment Skills Upgrading for Young Adults. *Mona Hill, Ignite Adult Learning Corporation*

The task will be to identify the common barriers to successfully completing upgrading that will enable young, marginalized adults between 18-30 years to move into further training or fulltime employment. (This identification could also be directed toward first year university and trades training.)

This research would include:

Background:

1. What are the common factors that prevent young marginalized adults from completing high school in our local community?
2. Who is most likely to drop out of high school, therefore needing upgrading at some point in the future?
3. What role has government and corporate interest played in the success rates of educational upgrading for young adults.

Current:

1. What are the common factors that result in lack of successfully completing educational and training programs geared towards young marginalized adults? That research would include examination of physical, mental/cognitive, emotional, spiritual (values driven), and social obstacles from, for the most part a qualitative perspective although there is room for quantitative results in some areas of social factors such as lack of healthy, affordable housing, financial factors, etc.
2. What perspectives are taken into account and addressed in upgrading and training institutions/programs during planning, in order to maximize successful retention?
3. Does the length of a program affect retention success rates?

4. What role does government or corporate funding play in minimizing the barriers to successful retention?
5. What role COULD government or corporate funding play in minimizing the barriers to successful retention?

Once the common factors are established as to why so many marginalized young adults are unable to successfully complete educational upgrading and other training, the goal is to understand these factors and offer reasonable recommendations that could greatly increase the chances of successfully completing the programs offered, that ultimately lead to self-supporting independence of marginalized, at-risk young adults.

3. Youth Educating about Health and Harm Reduction. *Meaghan McIlmoyl and Mahaila Scott, Planned Parenthood Regina*

YEAH has been an integral part of the prevention and education work at Planned Parenthood Regina. We have done work to address HIV through a peer harm reduction program and we have recently carried out a survey regarding future needs to be addressed by Planned Parenthood. This includes outreach to GLBTTQ, Aboriginal populations and newcomers to Canada. We will present on these issues and seek ideas for research on reaching these groups with sexual and reproductive health issues.

Session 4: Culture and Heritage

1. Growing Ecomuseums on the Canadian Prairies: the Saskatchewan Ecomuseums Initiative. *Glenn Sutter, Royal Saskatchewan Museum*

Ecomuseums are locally-driven, place-based organizations that encourage sustainable community development, based on heritage conservation and interpretation. In the 1980s, less than a decade after the first ecomuseums took root in Europe, the Saskatchewan museum community came together to talk about the merits and challenges of the model. Despite a high level of awareness about the value of cross-cutting, interdisciplinary projects, ecomuseums did not catch on in this province. Now, as part of the Saskatchewan Ecomuseums Initiative (SEI), there is renewed interest in the model and a handful of demonstration sites have been established. The SEI is a community engagement project being developed by the Royal Saskatchewan Museum as part of a sustainability education research program, in partnership with the Museums Association of Saskatchewan, SaskCulture, Heritage Saskatchewan, Heritage Canada, and Raven Consortium, Inc. This talk will describe the SEI and the mix of top-down and bottom-up steps that appear to be favouring the development of ecomuseums this time. The insights and potential for ecomuseum-based research may be broadly applicable, given that emerging sites include a rural ranching community associated with a national park (Val Marie), a low-income urban neighborhood with large First Nations population (North Central Regina), a nearby recreational area concerned about water issues (Calling Lakes/Katepwa), and a boreal region that includes valuable timber and thriving mushroom and tourism industries (Nipawin).

2. Living Heritage - Connecting Heritage to Quality of Life Issues. *Sandra Massey, Heritage Saskatchewan*

Ideas about what constitutes quality of life, wellbeing, prosperity and living a good life discussed in recent literature reflect the shifting values that characterize the pluralistic, digital world of the twenty-

first century. In order to adequately evaluate the long-term benefits of heritage programs and services it is essential to take part in a conversation around values, because what we measure should reflect what we value. UNESCO's 2003 definition of intangible cultural heritage or "living heritage" will be presented within the context of how people use the past in the present in one of two ways, to provide a sense of continuity with the past or as a point of departure. Understanding heritage as a living, dynamic component of daily life acknowledges how people use the past to define themselves and create meaning in their lives. "Living heritage" emphasizes human experience and development, and makes us agents of change by empowering us all to negotiate values in a pluralistic world and build a shared future.

In order to promote greater public awareness of how intangible cultural heritage or "living heritage" influences our individual life choices as well as how we address social concerns collectively, the heritage community must embrace a multi-disciplinary, cross-cultural, inter-generational, collaborative approach to heritage preservation/conservation, interpretation, and presentation. Quality of life issues related to health and wellbeing, citizenship and social cohesion, and education and employment will be highlighted and connected to the need for public policies and programs that support and nurture a sense of identity, belonging and place.

3. Visitor Centered Approach to the Development of Exhibitions and Programs in a Free Choice Learning Environment. *Julie Fisowich, Saskatchewan Science Centre*

The Saskatchewan Science Centre is an interactive science museum with a mandate of inspiring science and innovation in the people of Saskatchewan. Science Centres differ greatly from traditional museums with the inclusion of hands on exhibits, interactive programming and free choice learning. Free choice learning occurs when the learner or visitor chooses their own path to knowledge and does not follow a predetermined pathway. The impact of free choice learning can be difficult to assess and provides varying research challenges.

Assessing the impact of exhibitions on visitors can go beyond traditional survey methods. By using a visitor centered approach you can monitor visitor reactions to exhibits through observations, personal interviews and public forums. The information gathered is useful to guide development of future exhibitions and determine if the exhibit goals are being met. In addition, some research methods can aid in determining if learning has occurred or the visitor has gained an increased awareness in a particular topic. By gathering this information prior to the development of a new exhibition or program you can assess the needed outcomes before spending time and funds on a particular project. This presentation will discuss different methods used by science centres to monitor visitor interactions and gather useful data used in the creation of exhibitions.

Session 5: Campus Engagement

1. Improvising With iPads: A Partnered Inquiry into Technology-based Music Therapy, Improvisation and Cultural Expression in Health Settings. *Rebecca Caines, University of Regina; Rick Kotowich, Native Health Services; and Amanda Schenstead, Wascana Rehabilitation Centre*

This presentation will show the process and initial results from a research project investigating improvised music in health settings for creative, cultural and therapeutic benefit that took place summer 2014 with First Nations and Métis long term residents in the Wascana Rehabilitation Centre, funded by the Community Research Unit at the University of Regina and the Regina Improvisation

Studies Centre. It will include photographs, video and recordings, emerging results from interviews and descriptions of the cross-disciplinary methodologies employed.

2. Community Engagement at the Institut français - Research and Actions for the francophone in Minority Settings. *Frédéric Dupré, Institut français, and Angeline Dubois, Centre canadien de recherche sur les francophonies en milieu minoritaire*

In the course of the last 11 years, the Institut français has developed various projects and initiatives in partnership with community leaders to address key issues for the social and cultural development of francophones in minority settings across Saskatchewan and the country. Of the different initiatives and projects led in the history of the Institut, we will present briefly four:

1) The annual CRFM research grant competition: The CRFM funds original research projects and publications involving a methodology of university-community engagement that enhances the understanding of the francophone experience in minority contexts. Within the general orientation, the CRFM gives priority to projects falling under one of the CRFM's strategic research areas:

- Innovative Reflection on Issues of Cultural Diversity and Immigration
- Alternative community development strategies
- Issues facing young francophone Canadian adults in minority situations

5 programmes are offered and 2 of them are community programmes. Since 2005, 63 projects have been funded. The Institut français offers a personalized support to community organizations to apply to the competition, as well as mentorship during their projects.

2) The programme Terroir and rural development: created in partnership with the Fransaskois community. Since its creation in 2005, a long process of consultations, education, and research has been implemented. We will present two unique publications, "Saveurs et Savoirs" made for public awareness and community building in this program.

3) Métis and francophone travelling round tables initiatives: the conferences organized provided a real opportunity for dialogue and exchange between Métis and Francophones, which had not taken place for almost a century.

4) The Commission on Inclusion in the Fransaskois Community which was chaired by Dr. Wilfrid Denis, an elected community representative and sociologist. This project was proposed by the community, who asked the support of the Institut français. The Commission appointed six commissioners from the community and academic sectors to analyze the views heard during the public hearings and to make recommendations to ACF representatives.

3. Regina's Student Run Health Clinic: Evaluation of Client Needs and Volunteer Experiences. *Christina Mutschler, University of Regina*

Student Energy in Action for Regina Community Health (SEARCH) is a student run health clinic located in North Central Regina. The clinic targets the residents of the North Central community who have higher rates of illness due to many social issues in the area including higher rates of crime and poverty. The growing number of student run health clinics across Canada and the United States has brought concerns about the satisfaction and quality of care for clients attending such clinics. Student run health clinics are

programmed by student volunteers who work alongside mentors from various health professions to provide care to clients. Previous research shows that student run health clinics provide adequate health care to individuals of low socioeconomic status (SES) and most individuals report being satisfied with the care they receive. Research has not looked at the outcome for students who volunteer at student run health clinics. The student run health clinic in Regina had not been evaluated for its efforts in providing health services to the community of North Central Regina, or the experience of students volunteering at the clinic. The study used qualitative, open-ended surveys designed by the researcher to interview clients and volunteers from the clinic. Clients were interviewed after their visit to the clinic, and volunteers took an online survey. The responses to the interviews were analyzed using thematic content analysis to explore participants' experiences at the clinic. Results found that students appear to be benefiting from the experience of volunteering with low SES clients as it allows them to learn about the barriers people living in low SES have to receiving health care. Clients at the clinic appear to be benefiting from the educational programs, free meals, and interactions they receive at the clinic. Suggestions for improvement from both clients and volunteers included stable hours of operation, stability of programs each week, and more advertising to promote the programs at the clinic. Both clients and students suggested that the clinic should be made better known to the community of North Central due to the valuable resources it provides.

Poster Presentations

1. Making the Healthy Choice the Easy Choice: Regina Qu'Appelle Health Region. RQHR Health Promotion Department

Regina Qu'Appelle Health Region (RQHR) Health Promotion department strives to empower people, families and communities to increase control over and improve health through partnerships that address the social determinants of health and well-being. The current state of health care focuses on wait times, access to family physicians and specialists and patient flow through the health care system. While prevention is emphasized as important, it is often a challenge to provide results or show economic improvement in the short-term. Social return on investment may be a way to demonstrate the benefit of prevention at the local level. The health promotion department would like assistance determining social return on investment for the initiatives undertaken within the department. The department works to make the healthy choice the easy choice in areas such as breastfeeding, food security, built environments, youth empowerment, older adult physical activity, tobacco policy, healthy food access, and increased opportunities for physical activity.

The department would like to share the work completed over the last 5 years and explore further areas of partnership.

2. A Preliminary Evaluation of United Way Regina's Summer Success Initiative Pilot. United Way Regina

Over the summer of 2014, United Way Regina developed and launched a targeted community impact project focused on addressing the summer learning loss, specifically for children of low-income families. Summer learning loss refers to students' loss of learning over the summer months due to their decreased engagement with learning activities. This learning loss is often amplified for students in low-income families. While many children have access to activities that keep them learning or engaged in learning, those without the same opportunities often fall behind – and may never catch up. Summer

learning loss is cumulative, with the achievement gap between low- and high- income children widening over time. In partnership with Regina Public School Board and Regina Catholic School Board, United Way Regina provided funding for 3 community schools to deliver literacy programming to more than 60 children. The goal was to maintain their reading levels or reduce reading level losses over the summer months.

In order to determine the extent to which the program was successful in its goals, preliminary data was collected on students' engagement in reading and pre/post reading level scores. This poster presentation will summarize the pilot through a logic model, explaining its inputs and activities, outputs, and planned outcomes. The presentation will then summarize the findings from the initial evaluation, explaining the extent to which the outcomes were achieved, and what was learned that could improve the initiative in the future. Finally, the poster presentation will suggest some ways that future evaluations of the initiative could gather more useful data in order to better improve the program and understand the outcomes and impacts of the program.

3. Lessons from a Longitudinal Rural Healthy Aging Study. *Saskatchewan Population Health & Evaluation Research Unit*

Guided by principles of community-based research, our longitudinal Healthy Aging in Place study examined rural older adults' views on the supports that facilitate rural seniors' independence and ability to age in place over time. With the assistance of a community advisory team, interviews were conducted with approximately 40 seniors every 6 months over 3 years from 2011 to 2014 in the rural communities of Watrous, Young, and Wolseley, SK.

The research objectives are: 1) to share lessons learned and provide key strategies to support community-based research with rural older adults based on findings from our longitudinal Rural Healthy Aging study; and 2) to offer guidance to new researchers, health professionals and policy-makers planning to conduct community-based research with older adults in rural communities.

Lessons learned to support community-based research from our Rural Healthy Aging study included the following themes: community inspired focus and mandate; trust and team building; adaptable methodology; and collaborative knowledge translation and exchange. Examples included developing a community advisory group; trust building activities (i.e., full team meetings; community dialogue nights; face to face interviews over time); adapting data collection strategies based on listening to community feedback (i.e., moving to open-ended interview guides from survey-based guides; adjusting the data collection frequency based on participant feedback; revising the interview guides to reduce repetition); and developing diverse knowledge translation methods (i.e., community workshops, newsletter, holiday cards) to share the research to action components and the relevancy of the research to rural older adults.

This study highlights critical lessons learned in community-based research with rural older adults and has implications for a range of stakeholders including policy-makers, health practitioners and community leaders.

4. Youth Educating About Health and Harm Reduction *(see description in Session 3)*

5. A Living Wage for Regina *(see description in Session 1)*