

Surviving to Thriving: Assessing the Needs of Vulnerable Women



YWCA OF CALGARY

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EXECUTIVE SUMMARY

In 2012, the YWCA of Calgary conducted a needs assessment with women clients, staff, and service providers in Calgary to determine what are the most pressing needs for vulnerable women, and how this service sector can begin to strategically plan programs, policy and advocacy efforts to address these needs effectively - now and in the future.

It is clear from the research that women disproportionately face indicators of vulnerability and risk, due partly to a society that devalues women's work and criminalizes poverty and even those of us who enjoy some protective factors are just a lost job or sudden illness away from needing social support and assistance.

Women who are vulnerable are likely to face a multitude of barriers and challenges ranging in the degree of complexity and severity from woman to woman over the course of their lives. These may include personal barriers (e.g., lack of support and security, isolation, being emotionally dependent), interpersonal barriers (family support, relationships), community or social barriers (e.g., stigma) and structural/program barriers (e.g., lack of affordable childcare and services). As well they deal with so many other problems such as substandard housing, access barriers (e.g., transportation, programs, services), family violence, sexual abuse, and poverty.

Public policy continues to ignore the specific needs of vulnerable women and girls, cutting programs and services that can assist this population. There is a need for a gender-based analysis and approach to policy, programs and services to provide them with the skills and information they require to stay strong, healthy, and to make good choices. At the same time, work is needed to reduce the stigma and discrimination women experience in the community, public services and employment. Current proposed public policies like the elimination of the penny, social finance instruments or social impact bonds, and poverty-reduction initiatives may help to address some of these issues.

There are a many existing services outlined in the environmental scan conducted for this report, but these need to be better integrated and more seamless to increase accessibility and appropriateness to women's needs. Survey respondents identified a number of needs and gaps in the areas of:

1. Cost of Services and Access to Programs
2. Health Care
3. Affordable, Safe, and Livable Housing
4. Childcare
5. Education and Employment
6. Discrimination
7. Transportation
8. Legal System
9. Social Support
10. Poverty

It is apparent from the gaps identified that more advocacy with different levels of government is required to develop comprehensive strategies, and to leverage more funding for much needed infrastructure such as affordable housing, daycare spaces, and health care subsidies. As well, it will be important to work with Alberta Human Services to identify emerging occupational needs, develop job training programs and education for women to meet this demand, and revisit income support guidelines and regulations especially as they pertain to vulnerable women and children.

There are a number of promising practices outlined in this report that provide a gender-focused and appropriate approach for service providers and programs. Health Canada has noted a number of promising practices that include many of the suggestions obtained from participants in this study including: being holistic and addressing practical needs; employing supportive, collaborative, non-hierarchical approaches; providing services based on strengths not deficits; and providing services based on an empowerment model.

A number of recommendations are presented, taken from the literature as well as participants in this study, for government, service providers, the community at large and the YWCA of Calgary in particular.

Some address the need to look at root causes and social determinants of health to address violence and poverty women experience, and the multiple and interlocking impacts of policies and practices on different groups of women because of their race, class, ability, sexuality, gender identity, religion, culture, immigrant or other status. Others suggest policy review in the areas of income supplements, enforcement of pay equity legislation, employment and education, and increased funding for community-based services. Service providers are encouraged to increase peer-based models of delivery, address agency or procedural barriers, identify professional services in the community (e.g., lawyers, doctors, dentists, etc.), and partner more effectively to create a more integrated system of services. The larger community is urged to work to decrease discrimination against and stigmatization of vulnerable women, and reach out to provide social support and decrease isolation.

The report provides links to a number of resources that participants asked for including information on affordable housing, legal services, and services for immigrant women. Like many Calgarians, the women using the services of the YWCA were not aware of the range and types of services offered and they did not receive enough information about these resources.

This study and others demonstrate the need for an active plan to eliminate social inequity by gender and the feminization of poverty, as well as the the need for increased gender-specific training and services.

INTRODUCTION

Goals of YWCA of Calgary

In its current strategic plan, the YWCA of Calgary has identified the goal to be a catalyst and a leader in being responsive to the needs of women and ending family violence and poverty. The organization also aims to be a workplace of choice with committed employees who work with other sector partners to address the systemic issues that are at the root of family violence and poverty. The YWCA will be a shelter for women fleeing family violence, and the prevention and eradication of poverty will be a focal point within the organization. To these ends, the YWCA works to help women develop skills to break the cycle of poverty, provides housing for women experiencing poverty, and provides opportunities for children of women experiencing family violence or poverty. This report is one step to guide this strategic plan.

Project Overview

In 2012, the YWCA of Calgary conducted a needs assessment with women clients, staff, and service providers in Calgary to determine what are the most pressing needs for vulnerable women, and how this service sector can begin to strategically plan programs, policy and advocacy efforts to address these needs effectively - now and in the future.

Definitions of Vulnerability

There are many definitions of 'vulnerable' and 'vulnerable populations'. For this report, vulnerable means being susceptible to risk factors and vulnerable populations are those that do not have equitable access to protective factors and societal resources that lead to resiliency (see Model of Vulnerability, Pruegger 2012 in this report).

An individual's risk is known to vary as a function of opportunities and resources associated with the following social arrangements: personal traits and social status (age, sex, race, and ethnicity), ties between people (family structure, marital status, and social networks), environmental factors (school, jobs, income, and housing), and associated factors (violence and/or crime) (Leight, 2003).

Populations that are considered to be potentially vulnerable in Alberta include (Alberta Health Services, 2011):

- Aboriginal peoples
- People living in poverty
- Immigrants and temporary workers
- Refugees
- People with disabilities
- People who are gender and sexually diverse
- People experiencing homelessness or lack of affordable housing
- People with low literacy skills
- People living in poor, rural or remote communities

To this list should be added women, children and seniors experiencing poverty, violence and inadequate social support and the intersection of these with any of the above identities (e.g., immigrant, person with disability, etc.). (Alberta Health Services, 2011). Where people are part of intersecting identities that are vulnerable, or have an increased exposure to resources, their vulnerability will increase and resiliency decrease.

There are a number of determinants that expose individuals and groups to unequal distribution of and access to resources for living. The determinants include (see Alberta Health Services, 2011; Canadian Institutes of Health Research, 2002; Cook, 2006):

- Education
- Employment and working conditions
- Social and Physical environments
- Early and healthy childhood development
- Culture/Ethnicity/Immigrant/Aboriginal status
- Social exclusion
- Sex
- Social safety/support network
- Income and social status
- Health services/Personal health practices and coping skills
- Biology and genetic endowment

Socio-environmental, cultural and structural factors that help account for, or may serve to increase disparities and the vulnerabilities of disadvantaged groups leading to greater risk include (Canadian Institutes of Health Research, 2002):

- Unemployment or unstable employment, inadequate or poor working conditions
- Low socioeconomic status, low income, poverty
- Inadequate housing, poor living conditions
- Discrimination (e.g., racism, sexism)
- Marginalized family status
- Limited education
- Exposure to violence
- Food insecurity
- Lack of security and safety
- Low social support and unsupportive social environment
- Barriers to appropriate health services, preventive and social services
- Gender inequalities

It is clear from the research that women disproportionately face all of these indicators due partly to a society that devalues women's work and criminalizes poverty. In Calgary, the United Way's Poverty Index grouped poverty indicators into Material (renting, unemployed, no high school degree, low income) and Social Isolation (separated, divorced, widowed, single parent, recent immigrant, Aboriginal identity, persons with disability, persons living alone) measures (Classens, 2006). Again, women more often experience many of these indicators and even those of us who enjoy some of the protective factors are just a lost job or sudden illness away from needing social support and assistance.

INTRODUCTION

This report explores the needs of women in Calgary and research on women's needs assessments conducted in other jurisdictions. It: **1.** examines barriers women experience; **2.** takes a look at the current situation including public policy in relation to women and children and existing services in Calgary to highlight gaps and opportunities for partnership and future service growth; **3.** provides an overview of promising practices for women's services and programs; and **4.** makes recommendations to policy and future directions to guide the development and delivery of more effective, timely and directed programming and services.

Model of Vulnerability:

(Developed by V.J. Pruegger, Intercultural Interations Inc., 2012)



The Model of Vulnerability shows a number of important but not exhaustive protective and risk factors that may lead to vulnerability. Individuals who can avail themselves of protective factors will have higher resiliency and low stress, while those who experience a number of risk factors, will have high stress and less resiliency leading to vulnerability.

EXPLORING THE REAL NEEDS OF WOMEN

Focus Groups

Focus groups were conducted by the consultant with 85 female clients of the YWCA of Calgary, 10 YWCA staff, and 9 service providers from other women-centered agencies. Of the client sessions, specific and separate groups were offered for immigrant and Aboriginal women. The women and staff were asked about needs in nine areas that were identified by a 'literature review' (see appendix) as areas most important to vulnerable women. These were: parenting and childrearing, relationships (intimate and friendships), safety and abuse, finance, education and employment, housing, health, discrimination/stigma, and recovery. The focus groups were approximately 1.5 hours in length and clients received an honourarium for participating.

Four questions were asked in each area (these questions were slightly altered for service providers):

1. Are there any barriers you face in accessing services in this area (Barriers)?
2. Are there services or programs in this area that you think should be made available (Service Gaps)?
3. What do you think women's biggest needs are in this area (Biggest Needs)?
4. Which organizations are you aware of that are providing these services (Services Identified)?

The fourth question was used to develop an understanding of how much information women had about available services.

An e-survey was also conducted and was responded to by 33 people from a variety of services and agencies who were invited to participate. The comments in the survey were consistent to those obtained through the focus group; as such, the survey responses were amalgamated with those from the focus groups. The data were transcribed and the responses were themed and coded. While 10 themes formed the basis of the focus group questions, the themes that emerged from the data were grouped differently as many, such as cost and access of programs, spanned each area. For more information on methodology, see full report.

The Findings – Themes and Barriers

The main barriers and service gaps identified by the focus groups have been collapsed into 10 specific themes:

Cost of services and Access to programs

Clients and service providers raised the issue of cost for many services including transportation, upgrading classes, activities for children, gym memberships, affordable counseling, and legal support. Waiting lists for many services and programs prevent women from being able to obtain the skills or experience they require to improve their lives.

“We need more crisis centres but they are hard to access because you can't book ahead which increases anxiety having to wait until the last minute when you are already in crisis.”

EXPLORING THE REAL NEEDS OF WOMEN

Health care

The health care system in particular presents many barriers to low-income women. It is difficult to find a family doctor; especially a female doctor for those with cultural prohibitions against seeing a male doctor, and the lack of dental and eye care was mentioned consistently. Participants explained that because doctors and specialists work traditional hours and not on weekends, they generally have to access walk-in clinics or hospital emergency services for their health needs, which not only puts a burden on the system, but also prevents women from developing a long-term professional relationship with a family practitioner. This can lead to health issues being missed or misdiagnosed, as well as lack of access to preventative care and signatures on forms.

Mobile health clinics, services across the city, and more affordable wellness and physical activity programs are required.

“Publicly funded, accessible, complete health care is critical to poverty reduction.”

Affordable, Safe, and Livable Housing

Housing was one of the biggest concerns raised as it is difficult to feel safe, get a job, and create a better life without housing in a good neighbourhood with access to community based services and schools. Rent controls were mentioned several times as a means to ensure fairer rental rates. More housing options like cooperatives and rent-to-own models should be available. Participants also noted the need for a more transparent and enforceable landlord/tenant act that does not discriminate against certain groups of people. Staff talked about the need for on-going assistance and services for women experiencing family violence who stay in the home and do not go to a shelter. It was felt that there needs to be systemic change to recognize that women have a right to remain in their homes, and receive services that are integrated, adequate and comprehensive. A housing first model for women and children is required.

In terms of current crisis and family violence shelter spaces, the supply does not meet the demand. There is more need for second stage shelter with long-term residency options. Single women, and women with multiple or older children have a difficult time being housed. More community-based programs and outreach services to women in the home are required.

“If the priority is to work, I need housing. You can’t get a job if you’re homeless.”

“Sometimes the pressure to find housing leads to unsafe decisions and the shelter becomes part of the abuse cycle.”

Childcare

It is difficult for women to move forward when they do not have access to affordable and safe childcare. Without this, they cannot get a job, or upgrade their skills and education. Even when they have a job, the high cost of daycare, the difficulty transporting children to and from daycare, and the lack of daycare in evening hours and on weekends, makes it difficult to hold a job. A suggestion was that daycare dollars should go to mothers instead of daycares, so that they could afford to stay home, or could pay someone of their own choosing. Employers, even smaller employers, should be encouraged to provide daycare subsidy or spaces. Income support is inadequate to pay for rent and childcare. Women end up working more than one job, while trying to care for their children, leaving older children into the role of parent or straying from the family. Waiting periods for child support, or inconsistent support makes budgeting difficult so short-term funding should be available in the meantime. There is very little respite care for moms who need a break. Parenting styles for immigrant women often present a problem when childcare workers do not understand or criminalize parenting practices from another culture. Women want more parenting classes and access to affordable food, clothing, toys, and health care (e.g., dental, eye, counseling) for their children. In the legal system, women need a place to leave their children when going to court or visiting a lawyer, more knowledge of their rights, and more support for parents in custody battles. More crisis centres like the Children's Cottage are needed as is more formalized after school care for older children.

“Women who want to access education to upgrade or get a job can't, as there is no affordable, accessible childcare. It is more expensive to pay for childcare than to earn an income. They cannot start to move forward due to childcare, especially when they come from places where the extended family would help – here they are isolated and don't know their neighbours.”

Education and Employment

Women experience discrimination in employment and long waiting lists for upgrading programs. It is difficult to work and afford daycare for children and transportation to and from work. When women do find a job, their social assistance is decreased immediately, which prevents them from getting ahead. It was suggested that income support needs to continue longer and pay equity has to be enforced. Women are engaged in multiple jobs, split shifts, and part-time work, which is hard on their health and their children.

“Social assistance needs to be extended; women have to find a job but the system makes it impossible to get a good job that offers childcare.”

EXPLORING THE REAL NEEDS OF WOMEN

The client participants had a great desire to continue their education or upgrade, but found this difficult without support and more information on what subsidies, grants and loans are available. They also wanted to learn about starting their own business, and how to build their resume and interview skills. What is needed are more internships, job shadowing and mentorship opportunities, on-the-job and entrepreneurship training and career counseling. Immigrant women wanted mastery or equivalency exams to fast track them into their professions, and less emphasis on the 'Canadian experience' requirement, which is a hidden form of discrimination. They liked the current trades certification programs being offered and would like to see more of these in different occupational areas. Clients discussed a number of training opportunities they felt would help them. These included: financial planning and budgeting, health and wellness, ESL and language support, life skills, job preparation and workforce re-entry, computer literacy, first-aid, assertiveness training, human and employment rights and standards, legal clinics, safety and self-defense, cycle of abuse and healthy relationships, etc. It was suggested that until women are promoted to hold at least one-third of the highest levels in business, politics and education, their issues and voices will continue to be ignored.

“There are not enough women in the trades. We need to be more proactive so women do not end up in low paying positions.”

“We want training for older women who want to re-train and support for teen moms to stay in school.”

Discrimination

The stereotyping of low-income individuals, especially women and people who are Aboriginal, was mentioned as a systemic barrier that is enacted by landlords, police, lawyers, doctors and other professionals. There are government programs and policies that discriminate against women highlighting a need for advocacy for vulnerable women both with decision makers and professionals, but also with the larger community that stigmatizes low-income women or women experiencing family violence. Culturally appropriate programs and services, including the participation of Aboriginal Elders or cultural/spiritual advisors, was discussed as a way to promote recovery and health.

“We want acceptance and understanding - to be recognized as equals, and contributing members of our communities. Value what we offer as women.”

Transportation

Transportation came up over and over as a barrier. This was due to cost and accessibility. It is very hard for a woman, especially with a number of small children, to get them on the bus and to school on time, and still get to work on time. Double-strollers do not fit on most buses or are sometimes not allowed. Women who work in the industrial area in non-traditional hours (graveyard shifts) do not have access to transit, which may not run in these areas during these hours. There was discussion of the need for an Access Taxi service for low-income women with children, much as there is for people with disabilities, and more safe car seats in taxis that are up to code. It is also difficult to get to shelters for women who do not have their own transportation.

Legal System

The legal system is seen to have enormous gaps. Women did not feel they have access to the justice system, legal support or to their own case files and no support in custody battles or information on how to proceed with these. They felt that child support laws are not upheld. All women, especially immigrant women, want more information and training on law, where to go if children or the woman is abused, and children and parents rights. They suggested establishing drop-in, mobile or informal legal clinics where they can meet with lawyers and get information in safety and privacy before and after fleeing a violent situation. The women also did not feel that the police take women seriously - it ends up in 'he said/she said' - and they do not provide directions regarding safety. The rules and laws are not clear. Victim services need to be improved and more information is needed to find them. There are also differences in language and cultural value that create problems in family violence cases.

“The legal system is very complicated, especially for those with language barriers. Women go back to abusive relationships, it’s easier than dealing with the legal system.”

Social Support

One component of resiliency is to have a good social support network. Women wanted mentors and resource people to provide options and advice; someone to talk to whom they could trust and who would listen without judgment; and community-based support. Awareness was a big issue. Women wanted to see the public and professionals more informed about family violence, why women stay in abusive relationships, and why women are living on the streets or in shelters. They want validation of their experiences. The latter is important as it would help remove the stigma attached to women experiencing family violence or poverty, and may decrease discrimination as the larger community becomes aware of the needs and realities of these individuals. There needs to be more community and public education to decrease racism and misconceptions about vulnerable groups. The women wanted to see more opportunities like this study, for them to come together and learn from each other peer-to-peer. In this study, the exchange of information between the focus group participants was phenomenal. One of the gaps in services and supports identified was programs for senior women who may be re-entering the workplace, having to leave a long-term home, or experiencing health issues on the street.

“More education is needed to lessen discrimination, more public messages and awareness. Society should know about the problem and the financial cost of domestic violence.”

EXPLORING THE REAL NEEDS OF WOMEN

Poverty

Poverty seemed to be the underlying condition in many cases and this led to the biggest need overall being identified - a poverty reduction strategy that has a gender focus and input from women to get at the root causes of poverty for women. These include lack of enforcement of pay equity, lack of recognition of international credentials and expertise, precarious employment, and the criminalization or marginalization of the poor. Government policy and decision makers need to make the connection between abuse, mental health, child development and poverty and it was suggested that a guaranteed annual income be provided.

Another alternative mentioned several times by clients and service providers, was to change the expectation that women experiencing family violence should leave the home to find safety. This uproots women and children from employment, education, social support networks and is very costly. It may be better to look at removing the abusive partner from the home. For example, the 'Staying Home Leaving Violence' Pilot in New South Wales is premised on the question "why should women be the ones to leave?" and the premise that children should never have to leave home because of someone else's violence (McFerran, 2007).

“We need women centered care that is culturally appropriate and addresses women's issues separately, not in same way as for men.”

“Most (programs) are patterned after men's programs and so women are silenced.”

THE CURRENT SITUATION

Public Policy

Despite the feminization of poverty, which underlines so many of women's needs highlighted in this report, the federal government continues to erode efforts to achieve gender equality by cutting funding for 11 women's groups in 2010 and 6 more federally funded organizations devoted to research and communication in women's health in 2012. These cuts disproportionately impact disadvantaged and disempowered women.

In Alberta, Human Services is the ministry responsible for promoting and providing information on issues of concern to women (see www.child.alberta.ca/home/1065.cfm). In 2011, the Alberta Federation of Labour called on the Alberta Government to name a minister responsible for the Status of Women (see www.afl.org/index.php/Press-Release/alberta-government-must-do-more-to-improve-lives-of-women-says-afl-province-urged-to-appoint-minister-responsible-for-status-of-women.html) but that has not occurred. While The City of Calgary and the province fund some agencies through the Family and Community Support Services (FCSS) funding partnership, The City does not have any policies or research programs specifically directed at women.

Overall, current governments continue to erode social programs and download the social safety net to the voluntary sector. Faid (2009) provides an overview of poverty reduction policies and programs in Alberta historically and up to the Stelmach government era. This report is a succinct roadmap of how public policy has shifted over time.

Unlike the other western provinces, Alberta has never experienced a counterbalance of conservative and more left-leaning governments. The Progressive Conservative Party has held uninterrupted power in government for 37 years against an Opposition that is typically too weak to mount a challenge. Consequently, the values of neo-liberalism are firmly entrenched in Alberta's social policy. (A neo-liberal mindset assumes that, in a strong economy, individual responsibility and the demand for workers replace the need for social programs.) In the province today, jobs may be more available, but as the cost of living rises, working Albertans who do not qualify for health, housing and other subsidies are often worse off than welfare recipients. As a result, the working-poor in Alberta tend to be the first to be hurt and the last to get help (Faid, 2009).

THE CURRENT SITUATION

Gaps in Existing Services and Needs

There are many existing services providing information, assistance and programs for women in need in Calgary. It appears that service information is available; it is just not getting to vulnerable women in a format they find accessible.

While participants of the focus groups acknowledged some very good programs and services, there are not enough of them, waiting lists are long, and sometimes cost is a barrier to access. Some of the biggest gaps identified included:

- Affordable, safe, and accessible childcare especially in the evenings and on weekends. More employers, especially small employers, need to provide daycare.
- Affordable health care, especially dental, culturally appropriate counselling (for couples, children), and eye care for women and children. Immigrant women need more female interpreters, and women would like more affordable recreation opportunities for them and their children.
- More crisis centres in all quadrants of the city and more second stage housing.
- Affordable, adequate and appropriate housing for different family types in good neighbourhoods (low crime rates). More community based housing programs and support for women to stay in their homes.
- Better access to the legal system and respectful, comprehensive legal services.
- More peer-to-peer interactions, and access to mentors.
- Awareness campaigns to dispel misconceptions, stereotypes and prejudice and to ensure professionals are better informed in order to treat women with respect and dignity.
- Income support that is adequate to meet basic needs, easier to access, and sustained longer when transitioning into the workplace. Recognition of international qualifications and experience and fast-tracking opportunities for immigrant professionals through mastery exams and job shadowing. Support should be available for women in shelters or remaining in their homes.
- A women-centered poverty reduction strategy that addresses the causes of poverty for women as well as enforcement of pay equity legislation.
- One place to find information on available subsidies, resources, job and education information, and supports.

A LOOK TO THE FUTURE

Future Service Needs

It is apparent from the gaps acknowledged in the previous section, that more advocacy with different levels of government is required to develop comprehensive strategies, and to leverage more funding for much needed infrastructure such as affordable housing, daycare spaces, and health care subsidies. As well, it will be important to work with Alberta Human Services to identify emerging occupational needs, develop job training programs and education for women to meet this demand, and revisit income support guidelines and regulations especially as they pertain to vulnerable women and children. Much as we see in 10 year plans to end homelessness, and poverty reduction strategies, there needs to be a public awareness campaign to inform the larger society about the vulnerability of women, the risk factors that lead to this vulnerability, and the resiliency of these women. More work is needed to demonstrate the value they have to our communities, and the unacceptability of women and children living in poverty or homelessness, as well as shifting the victim blaming from women experiencing family violence to the perpetrators, perhaps as a mental health issue.

These are long-term and difficult needs that will require dedication and partnerships between the government, the nonprofit sector and the community.

A LOOK TO THE FUTURE

Promising Practices

Programs that serve women and girls must take into account their gendered status in our society. Women may share many of the same problems as men, but their problems are often the result of their status as females (such as sexual abuse, male violence, oppression by family members, occupational inequality and early motherhood) and as such, they require different program approaches than men and boys (POWER Camp, 2006).

As well, women as both service providers and clients are often in “caregiver” roles, adding to their stress. Women in the focus groups discussed the lack of support for this caregiving role and its impact on employment and education opportunities. The following charts offer some promising practices to support caregivers.

Promising Practices

Promising Practice Indicators

Respond to the Unique Care Situation

- Ask caregivers what they need and tailor services and content accordingly
- Consider the relationship between the caregiver and care recipient
- Include strategies to address family dynamics and roles
- Consider the influence of gender
- Recognize cultural and societal influences

Stimulate Caregiver Involvement and Interest

- Foster networking among caregivers
- Make connections to community services (referrals and follow-up)
- Offer online interactive program components
- Help caregivers apply knowledge and skills

Address the Emotional Context of Providing Care

- Reinforce that caregivers need to care for themselves
- Recognize different emotional stages of caregiving
- Affirm caregiver competence and confidence
- Encourage caregivers to consider their positive experiences

Provide Relevant Information

- Educate caregivers about how the system works
- Provide practical strategies for caring
- Address information needs over time

Enable Caregiver Participation

- Arrange for respite if needed
- Arrange for transportation if needed
- Make the program convenient
- Provide a welcoming and comfortable atmosphere

Source - Adapted from Brookman, et al., 2011.

Best Practices in Meeting Needs of Women

- Provide a menu of options and approaches
- Be holistic and address practical needs
- Be gender specific
- Support connectivity among women
- Employ supportive, collaborative, non-hierarchical approaches
- Provide services based on the empowerment model
- Address issues of primary concern to women, including childcare
- Be respectful and female driven
- Support female education and awareness
- Provide treatment that is based on female strengths, not deficits
- Provided a continuum of services to meet female needs
- Work with women on realistic objectives and accept that relapse is a learning experience not a defining point in recovery and improvement

Source - Adapted from Brookman, et al., 2011.

RECOMMENDATIONS

Most of the research reviewed for this study provided recommendations to government, service agencies and community. These recommendations, and the many other suggestions that have surfaced in this study, have been condensed in this section highlighting those which are most pertinent for this sector or most critical. Many of them echo what the participants in this study noted as important for vulnerable women. Recommendations often include an active plan to eliminate social inequity by gender and the feminization of poverty, as well as the need for gender-specific training and services (see Cakebread Consulting, 2007; Convergence, 2006; Dennison, et al., 2001; Jonikas & Bamberger, 1997; POWER Camp National, 2006; Training and Adjustment Board, 2005; Women's Need, 2002). In one study, there is a list of recommendations for provincial governments for female-centred approaches and a clear gender analysis of programs, too lengthy to consider here, but worth exploring for any advocacy with the Alberta government (see Home, Donner, & Thurston, 1999).

Recommendations for Governments and Funders

- Address the feminization and criminalization of poverty by ensuring that poverty-reduction strategies have a gender-based analysis.
- Enforce pay equity legislation.
- The root causes of women's homelessness are poverty, abuse, mental and physical illness and substance use problems. Women are more vulnerable to housing loss when faced with one or more of these issues. Develop mechanisms to ensure that women facing these issues are able to maintain their housing and/or regain housing quickly (Cakebread, 2007). More attention must be paid to removing the male abuser from the home while leaving women and children intact in their communities and with their social support structures. Rent controls, rent-to-own options, and cooperative housing were also mentioned as potential solutions to the housing issue.
- Work in partnership to address the lack of affordable and adequate housing and under-funded emergency and second stage shelters, and addiction centres (expand the number of treatment beds). Allocate funding to provide housing that specifically addresses the needs of women and children. Use multiple types of supportive and housing first options to meet differing needs of women.
- Ensure that emergency services are accessible by public transportation and that programs are in place to address the cost of transportation for low-income Albertans and especially women with children. Assess the need for access during non-traditional working hours and in industrial areas.
- Use the social determinants of health to create vibrant communities and address the root causes of poverty.
- Recognize and validate violence against girls and young women. Apply an intersectional feminist analysis that looks at the multiple and interlocking impacts of policies and practices on different groups of women because of their race, class, ability, sexuality, gender identity, religion, culture, immigrant or other status. Create opportunities for engagement of girls and women to express their concerns and ideas to decision-makers and community leaders (POWER Camp 2006).
- Consider annual guaranteed income plans and/or increases to income support and social assistance programs.
- Address quality, access and funding related to the provision of child care.
- Increase funding for community-based services.
- Develop a municipal task force to address the reduction of poverty-related crimes (Training and Adjustment Board, 2005).
- Work with employers around the importance of on-the-job training, orientation, higher wages, more flexible hours, on-site childcare, childcare subsidies, and transportation subsidies (Training and Adjustment Board, 2005).

Recommendations for Service Providers

- Develop partnerships between agencies to de-compartmentalize services.
- Recognize that one size does not fit all (services vs programs).
- Provide client focused and non-judgmental service using peer-based models of delivery.
- Provide effective training programs within the service organization to ensure that staff members are culturally competent.
- Ensure that all women feel welcome in the organization; some historically underserved populations, e.g., LGBT, Aboriginal, and racialized women assert that they often experience discrimination from the services and service providers that are there to help them.
- Dismantle agency or procedural processes that inadvertently serve as barriers to service, e.g., difficulty reaching someone on the phone to provide information or schedule appointments; difficulty filling out or obtaining information about payment options or service eligibility requirements; the lack of child care on-site for appointments; hours of operation (particularly after work hours); long waits for service and waiting lists; and the lack of repeated access to the same providers for continuity (Cakebread, 2007).
- Create a multi-year plan that outlines the steps required to identify, recruit, sustain, and develop the participation of a variety of women among the membership base, volunteer base, staff, and board of directors. (Cakebread, 2007). Consider hiring staff with legal or medical expertise.
- Create a targeted communication plan with the goal to assist the organization in recruiting specifically targeted sub-groups of women participants to its client, donor, supporter, and volunteer bases. Communication must be consistent and repetitive and extend across a long enough period (several years) to begin to impact all levels of perception. This requires a significant commitment of resources and funds. Consider the continual building of a comprehensive women's email list as an outreach and informational tool, but also access public service announcements in a variety of media (Cakebread, 2007).
- Create a peer-based women's advisory board that can assist with community involvement and program planning ensuring that programs are low-cost, available to all sub-groups, designed for specific needs of different groups of women, and provide safe and reliable childcare.
- Increase resources for and improve access to legal services that can assist women in custody-related issues and other legal matters.
- Investigate and address high incarceration rates and the correlation between being homeless or living downtown and being incarcerated. Develop partnerships with the Calgary Police Service to better meet the needs of homeless women and support placement services for homeless women being released from jail (Dennison, et al. 2001).
- Support and implement policies and programs in mainstream systems that close the "front door" to homelessness, such as eviction prevention, rental assistance, diversion programs, streamlined public assistance, and others (Dennison, et al. 2001).
- Identify lawyers, doctors, dentists, counselors, etc. who might be willing to donate their services or provide mobile clinics.
- Strength based program design.

RECOMMENDATIONS

Recommendations for Community

- Historically, underserved populations often come to understand and/or perceive themselves as less valued and less important relative to the larger societal whole. Over time, the “unwanted and unrepresented” perception becomes a part of the group’s world-view, such that out of disappointment, frustration and low expectations, they withdraw their attention and participation. Such perceptions are extremely resistant to change, in no small part because changing perceptions requires encountering new experiences. In order to change these perceptions and negative expectations, the consistent effort and dedication of resources is required (Berberet, 2005).
- Connect women to and increase their participation in community organizations and activities to decrease social isolation and negative perceptions.



APPENDIX

Literature Review

An overview of the literature shows a mixture of women's needs assessments, poverty reports, and best practices for women-friendly programs and services. Most of the needs assessments focus on health care and addictions and data was obtained through focus groups, surveys, and interviews with vulnerable women and service providers. The 10 main areas explored in this study, were adapted from the themes that emerged in an extensive needs assessment conducted in Chicago as they were seen to be comprehensive (Cook, Jonikas & Bamberger, 2002). This section will provide a brief summary of existing research on women's needs.

In several needs assessment it is not surprising to find similar needs identified as those that emerged in this study. These include:

- Lack of adequate and affordable housing and shelter space
- Inadequate income supports
- Transportation
- Childcare
- Counseling
- Employment barriers and skill gaps
- Legal services
- Social Support

Women are overwhelmed by personal barriers they face including shame and guilt; being isolated; a lack of support and security; being emotionally dependent (afraid of losing their relationship and being alone); and dealing with so many other problems such as substandard housing, spousal violence or poverty (Health Canada, 2001).

Health Canada also identified interpersonal barriers (fear of losing children, family support, partners not supporting treatment); community/social barriers (social stigma and cultural taboos making acknowledgement of problems more difficult); and structural/program barriers (lack of reliable/low cost childcare, cost of services, lack of appropriate/flexible services, insufficient and inaccessible program information). Specific groups of women including Aboriginal and immigrant women face additional barriers (lack of culturally appropriate and gender-specific services; lack of community support and modeling; need for support to reintegrate into community; and language/cultural barriers) (see also Research Branch, 2004).

As in the literature, women in this study talked about the need to better protect younger women and girls and to provide them with the skills and information they require to stay strong, healthy, and to make good choices. Lack of self-esteem, early or high risk sex, use of drugs and alcohol, being racialized, homophobia, poverty, family violence, sexual abuse, and poor parental control and parent-child relationships are all risk factors for young women and girls (YWCHAC, 2009).

Girls experience a continuum of violence, ranging from sexual harassment to rape. Societal acceptance of violence was identified as a major issue. Violence has become normalized. Self-esteem, self-image, and peer pressure are significant issues of concern to girls. Self-harm (suicide, eating disorders, etc.), and the internalization of stereotypes and negative images of girls, have created a 'girl poisoning environment.' Depression in girls is a symptom of this environment, as is girl-on-girl violence. Girls talked about having to 'watch their backs,' and living in a 'war zone' (POWER Camp National, 2006, p. 23).

The University of Victoria has developed a Gender-Sensitive Guide for Needs Assessment for Youth that serves as a tool to help workers and youth work together to identify needs, and capacities (University of Victoria, 2001).

A study of women's homelessness notes that it is often invisible as they will stay in homes of friends temporarily, share inadequate housing with others, or enter a sexual relationship they would otherwise avoid to gain shelter. Suburban and rural homelessness is also less visible (Cakebread Consulting, 2007).

One study looked at the issue of powerlessness, which clients in this study did not verbally mention, but what is not said is often important and this issue arose 'in between the lines' as was expressed indirectly in terms of frustration, anger, and how difficult it is for women to find services to meet their needs. They feel unimportant, neglected, invisible, mistrusted, and stigmatized, which may motivate them to move away from rather than toward support and connection (Berberet, 2005).

In 2008, the United Way of Calgary and Area published a provocative report that explored the feminization and criminalization of poverty and poverty-related crimes on women and children in Alberta (MacFarlane & Milaney, 2008). It provides a list of progressive services and resources that are community-based, and legal practices and supports that show positive rather than punitive results for women. There is also a list of national and international policies and programs in the justice system that help women.

In Calgary, the top 10 needs of over 1,500 women surveyed included health issues (lack of sleep, stress, grief, lack of physical activity or mobility, and depression), and social issues (loneliness, caring for a family member, fear of aging without support). The top 10 types of programs they used in the past year highlighted the kinds of services and programs women in this study want to see more of: doctors, recreation/leisure, library, adult education and training, nutrition counseling, childcare, mental health, self-help or support groups, support services for persons with disabilities and senior's centres (City of Calgary, 2009). In addition, at-risk women do not have access to appropriate nutrition or health care (even for basic hygiene products like toothbrushes) (Cakebread Consulting, 2007).

It is clear from this brief overview of the literature, that there is a great deal of overlap in the issues affecting women, and identical recommendations for improvements to policy, services and programs as those that surfaced in this study. These reports stretch over nearly a 15-year period, and yet the same recommendations made in 2009 hold true in 2012.

APPENDIX

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The YWCA of Calgary works to break the cycles of family violence and poverty by building capacity in women and their families and advocating for necessary social change. Providing a continuum of services, we give women the power and the opportunity to thrive in our community.

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