

COMMUNITY LEADERSHIP IN ACTION: THE **STRENGTH** STUDY



REPORT OF PILOT STUDY FINDINGS
APRIL 15, 2018 TO JANUARY 28, 2020



INNER-CITY
WOMEN'S
INITIATIVES



THE UNIVERSITY
OF BRITISH COLUMBIA



Capacity
Research Unit



What is in this report

This report describes findings from the STRENGTH pilot study, which was developed and conducted over three years. Findings from data presented in this report are drawn from April 15, 2018 to January 28, 2020.

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Acknowledgements

This report is dedicated to the memory of Jade Cosa (1992-2017), an essential member of the Community Advisory Committee. Jade, you are deeply missed.

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The STRENGTH Project

A three-year community-based, participatory action pilot study to design a women-led, trauma and violence informed model of outreach situated in the Downtown Eastside Neighbourhood of Vancouver, British Columbia.

Using a strengths-based approach that recognizes women's resilience as well as the impacts of ongoing and historical trauma, outreach teams worked to build trust and relationships between outreach workers and self-identifying women. Outreach teams worked with women in identifying their goals and needs and in partnership, supported them to engage with services and supports to address their goals. The outreach teams included Community Health Workers – individuals with lived experience in the community – and non-experiential Outreach Workers. The community lead organization, Inner-City Women's Initiative Society (ICWIS), provided on the ground mentorship and support to advance the capacity of the outreach teams. A community advisory committee of experiential experts of women from within the DTES community provided oversight and leadership to ensure that the research was ethical, non-harmful, and meaningful for their community.

The Team

Community Co lead:

Linda Dewar

Executive Director, Inner City Women's Initiatives Society

Academic Co Lead:

Vicky Bungay

Professor, UBC School of Nursing

Community Advisors:

Jade Cosa
Chase Engh
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Research, Service and Community Team Members:

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Colleen Varcoe	Briony Metcalfe

Partnering Organizations:

Rise Women's Legal Centre	womenslegalcentre.ca
West Coast LEAF	www.westcoastleaf.org
University of Windsor	www.uwindsor.ca
Nova Scotia Department of Community Services	novascotia.ca/coms
GRID Networks Inc.	www.gridnetworks.ca

What we did

Many women experience challenges receiving services appropriate to their needs. These challenges are shaped by siloed service delivery, isolation, knowledge gaps about services, and negative encounters in support service settings. Outreach activities can build lasting relationships between support workers and women in ways that enhance quality of life and overall wellbeing, and are not harmful or re-traumatizing. **The overall aim** of the project was to develop a model of outreach that was women-led, strengths-based and trauma and violence informed.



Academic-Community Partnership

The STRENGTH project was built upon the expertise and leadership of women in community. The **Inner-City Women's Initiatives Society (ICWIS)** was the lead community partner and together with women, they built a community advisory committee (CAC) to co-lead the project.

Clients, staff and leadership of ICWIS identified the need for strengths-based women led programming, that was not deficit based or siloed to engage with the women most often missing in supportive health and social services outside of a crisis context.

The CAC was established as a key advisory and decision-making body for the project as a whole. Sharing from their experiential expertise, the CAC ensured that women's safety was upheld at all times, that the research was ethical and the results meaningful for participants and the community as a whole.

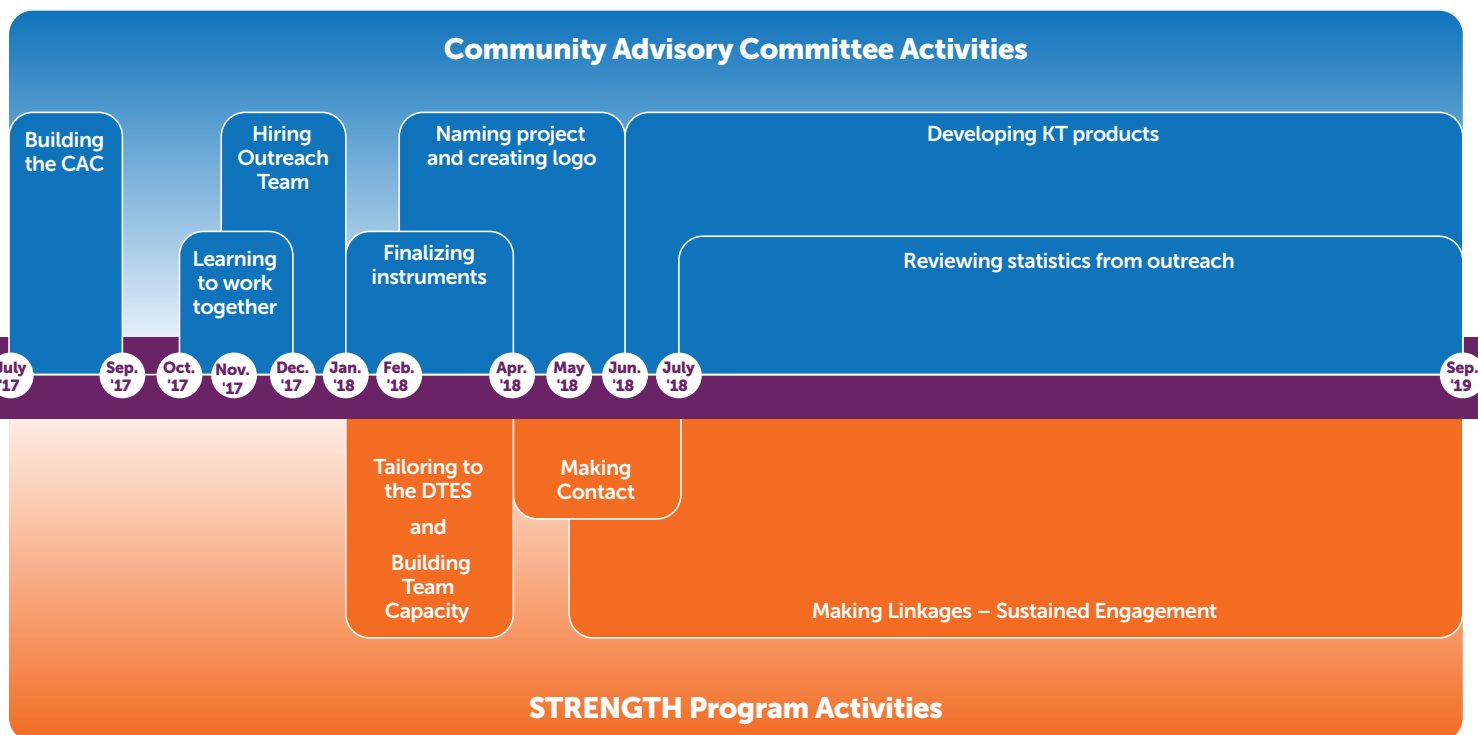
The **CAC** met 44 times between 2017 and 2019 to:

- Provide leadership, direction, and shape all aspects of how outreach services were provided to women in the DTES
- Make research decisions about survey and interview questions
- Reassess activities and make changes to improve upon outreach activities, making them useful, ethical, appropriate and safe for all women
- Communicate with and provide mentorship to outreach workers about methods of engaging with women, useful and less supportive resources in the DTES, and problem solving with clients and service providers

STRENGTH academic partners included researchers from several universities, who have a focus on community-based participatory research, as well as community and service team members across Canada.

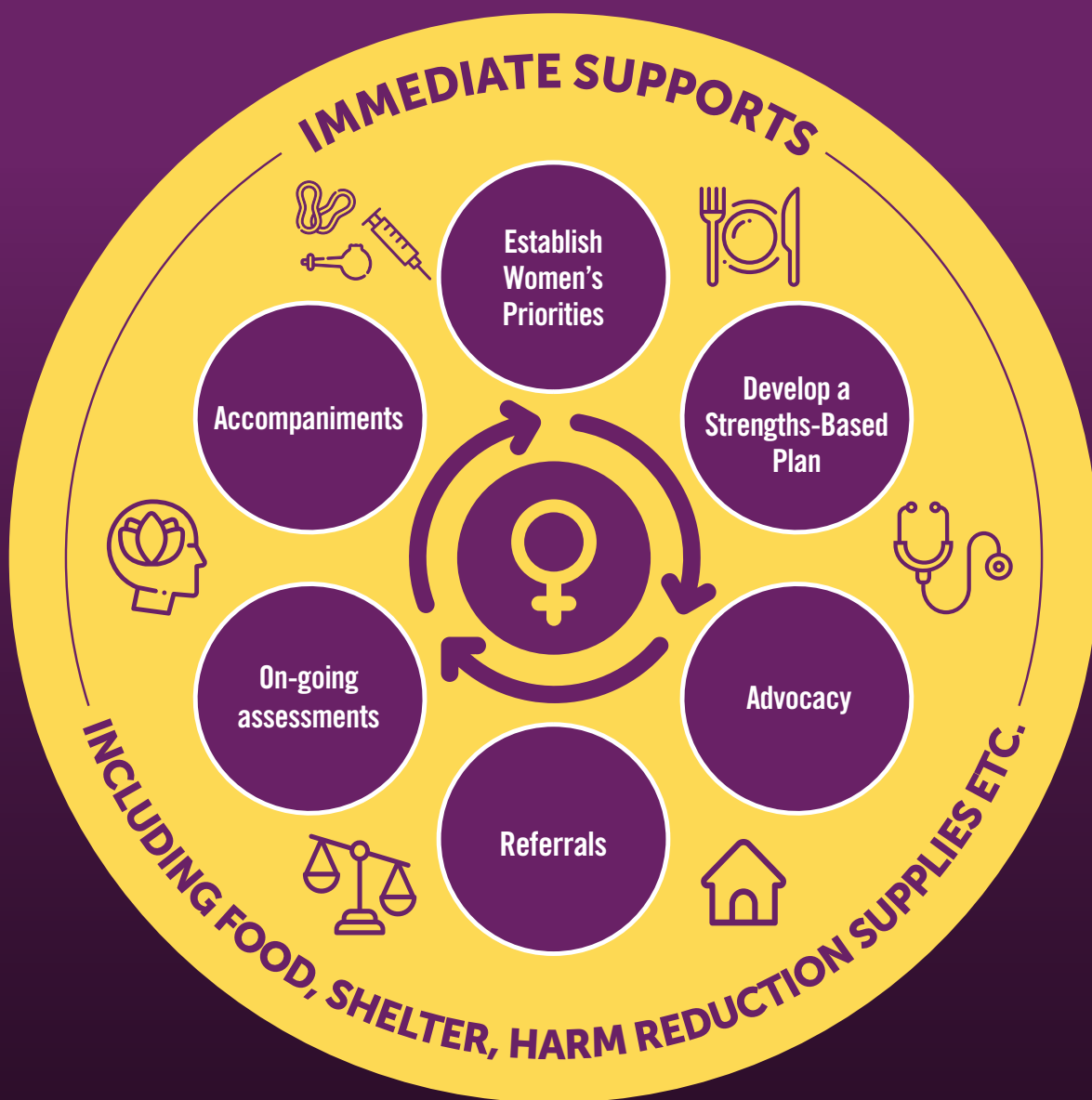


Timeline



STRENGTH Model of Engagement

The **STRENGTH** program and process wraps around women to support them. It creates a reciprocal, mutual partnership between them and the outreach team. Through this, women are able to identify and begin to work towards their own priorities.



Engagement with **STRENGTH**

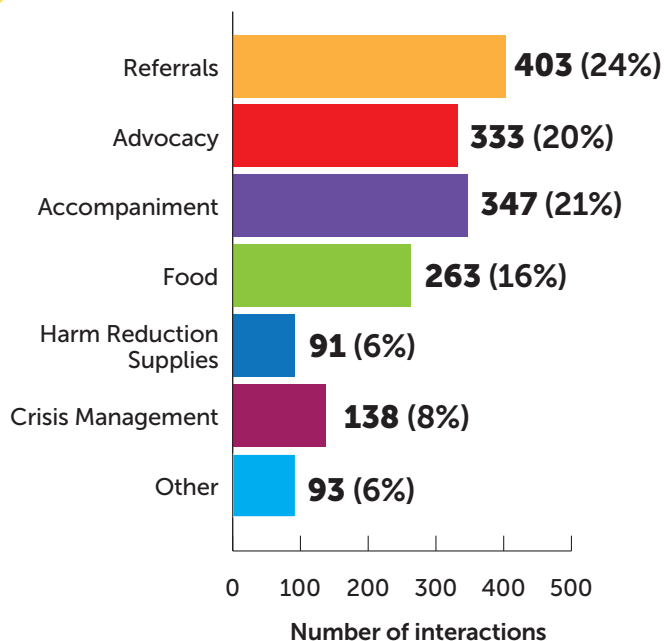
From April 15, 2018 to September 30, 2019

The **STRENGTH** team met with women

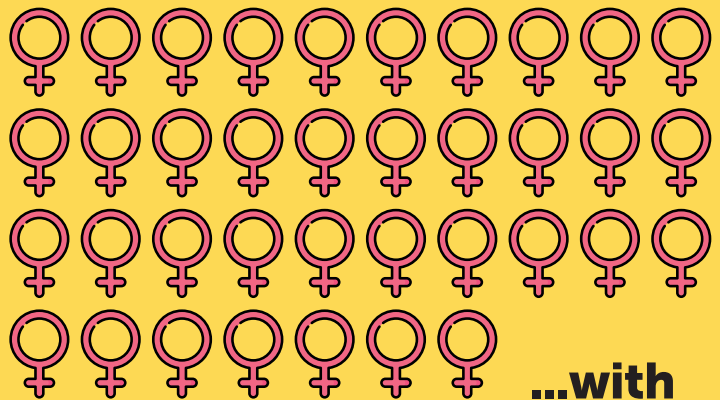
1,605 times

- Relationship building was at the core of every interaction.
- During each meeting, the STRENGTH team focused on various outreach activities with women.

A single interaction could include multiple outreach activities:



37 women worked one-on-one with an outreach worker...



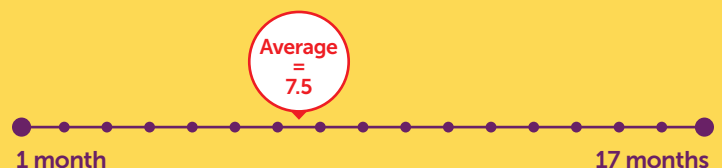
...with

372 interactions!

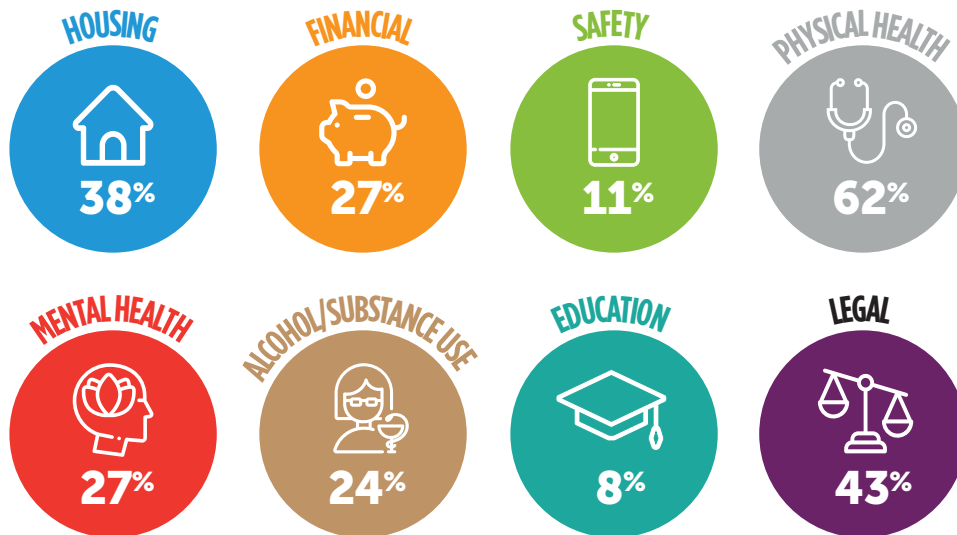
Engagement ranged from **a single interaction up to 34 interactions**. On average, women engaged with STRENGTH about 10 times.



Women remained engaged with STRENGTH for **an average of 7.5 months**.



Most women identified multiple priority areas to focus on that spoke to their pressing concerns in their everyday lives. Some women did not work on any priorities and among these the outreach teams primarily focused on attempting to build relationships to create opportunities for future support.



* 16% of women indicated "none" as a priority.

Many women worked on more than one priority area, and there was some variation in short- and long-term engagement with the program.

Two women's stories show the range of how women engaged with STRENGTH.

One woman worked with STRENGTH for a month and half. She had four interactions with an outreach worker during that time. Her engagement with the outreach team focused on addressing her legal needs including emotional support, accompaniment and transportation for court appearances.

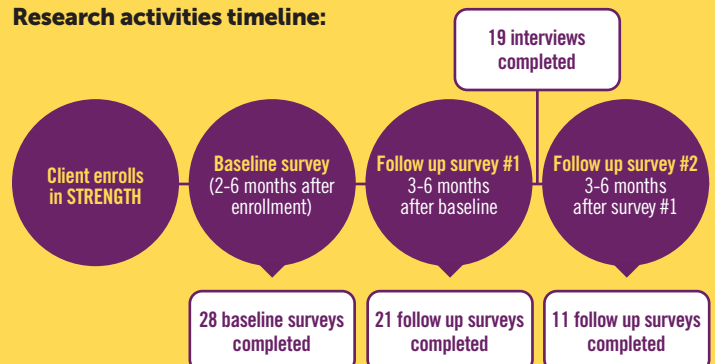
Another woman had nine interactions with STRENGTH over a period of 11 months. Legal priorities included obtaining identification and ongoing connection with her family. Her engagement with the outreach team also supported her to receive appropriate care while hospitalized and contributed to her accessing treatment related to substance use concerns.

Many women participated in research activities, including surveys and one-to-one interviews.

Surveys captured information about women's health, wellbeing, supports and resources. Interviews were about women's experiences working with the STRENGTH program.

60 surveys were completed at **three time points** after clients enrolled as well as **19 in-depth interviews** between follow-up surveys #1 and #2.

Research activities timeline:

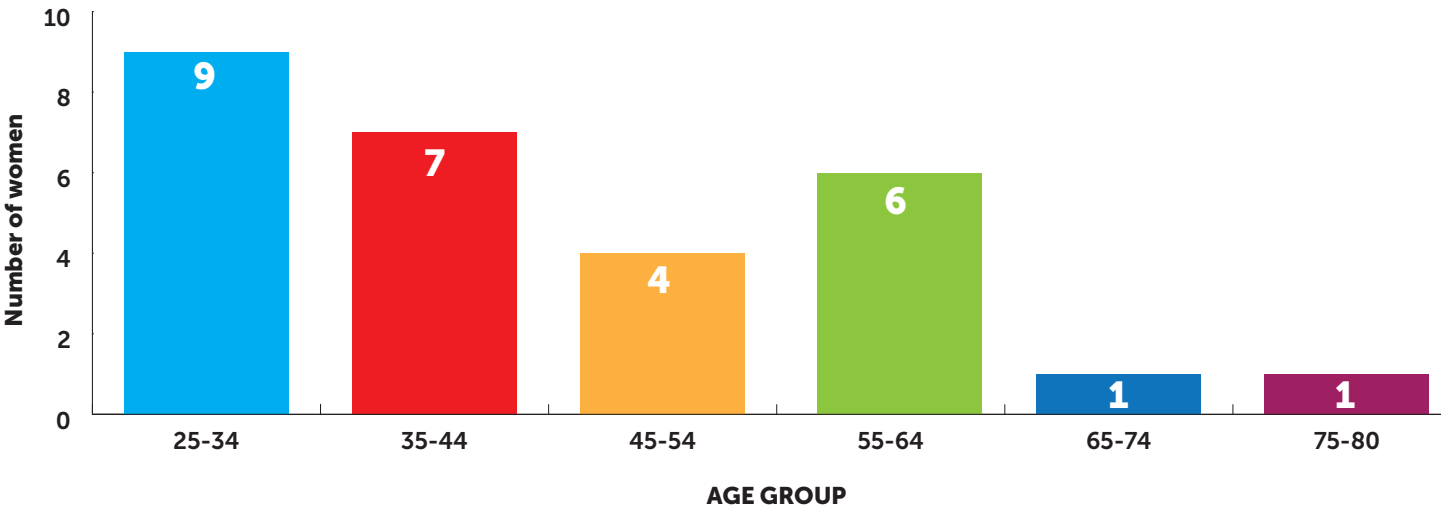


Who participated

We completed an initial survey with 28 of the women who were working with the outreach teams. Those initial surveys give us a sense of some of the aspects of women’s lives among those who participated in the STRENGTH pilot project.

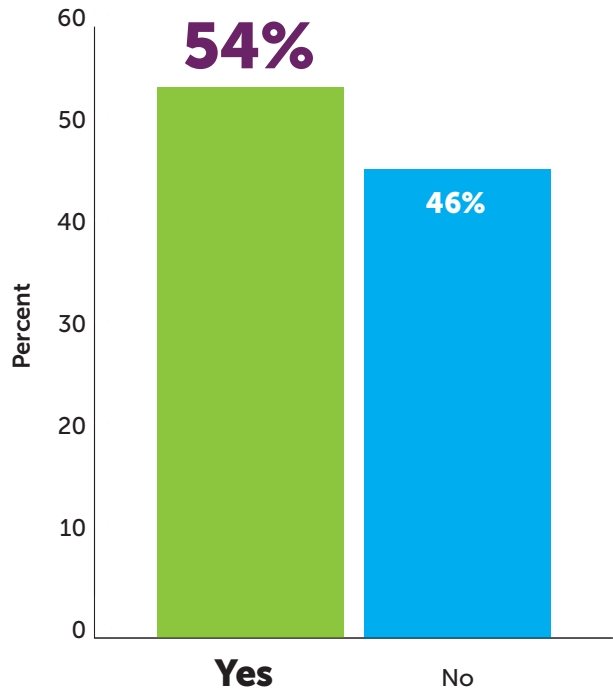


We worked with women across the age spectrum (26 to 79), with an average age of 45.



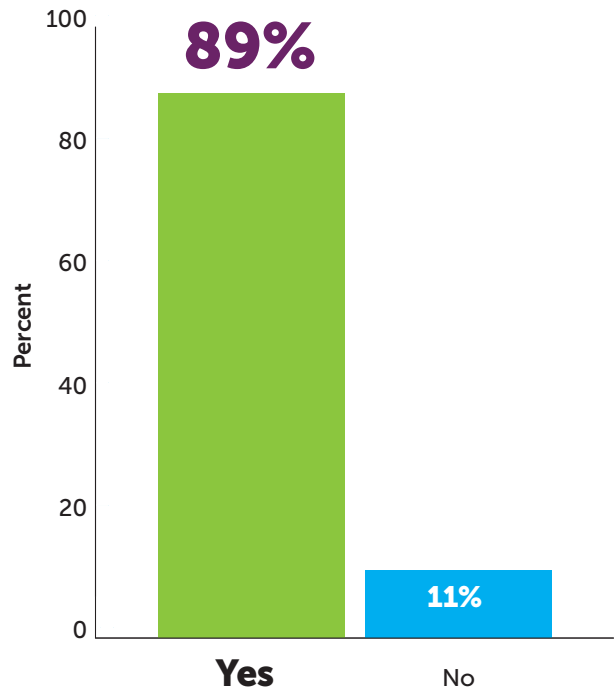


Self-identify as Indigenous (15 out of 28)



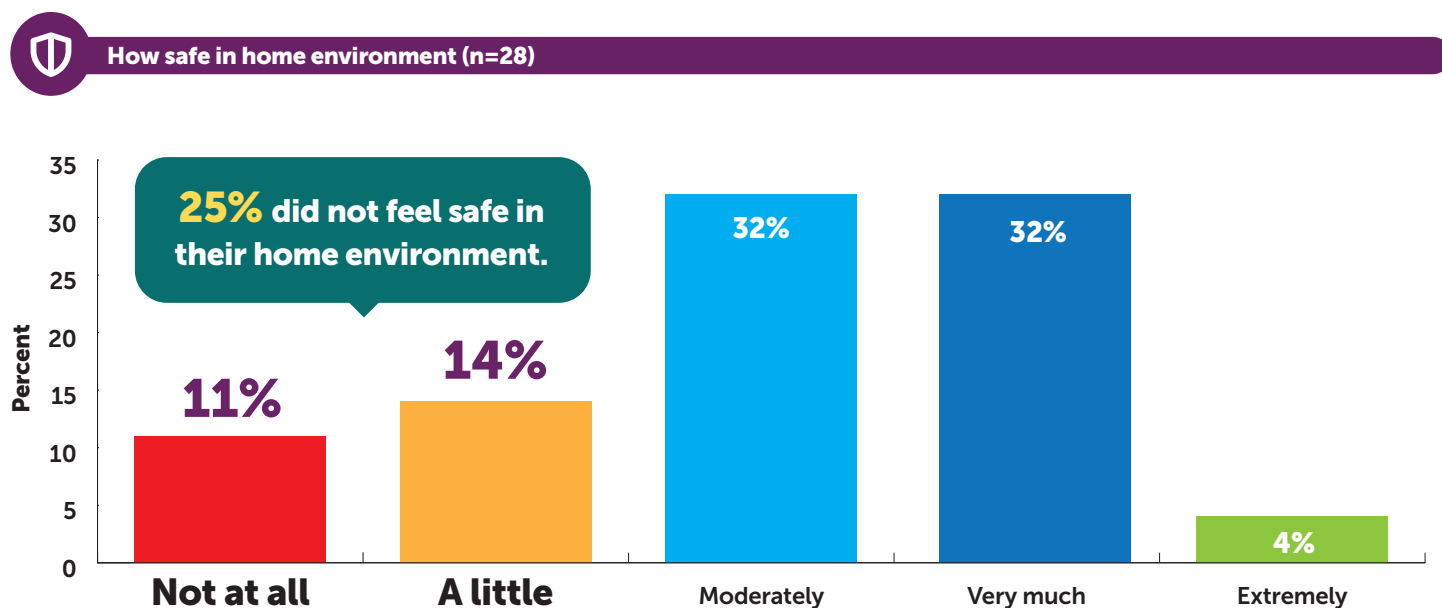
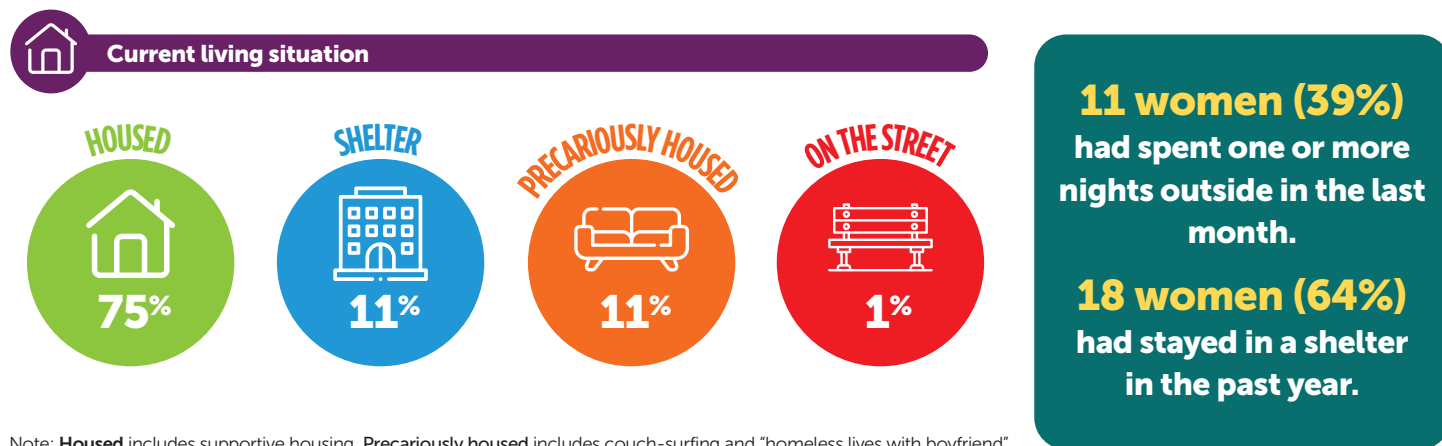


Born in Canada (25 out of 28)



Challenges women continue to face in the DTES

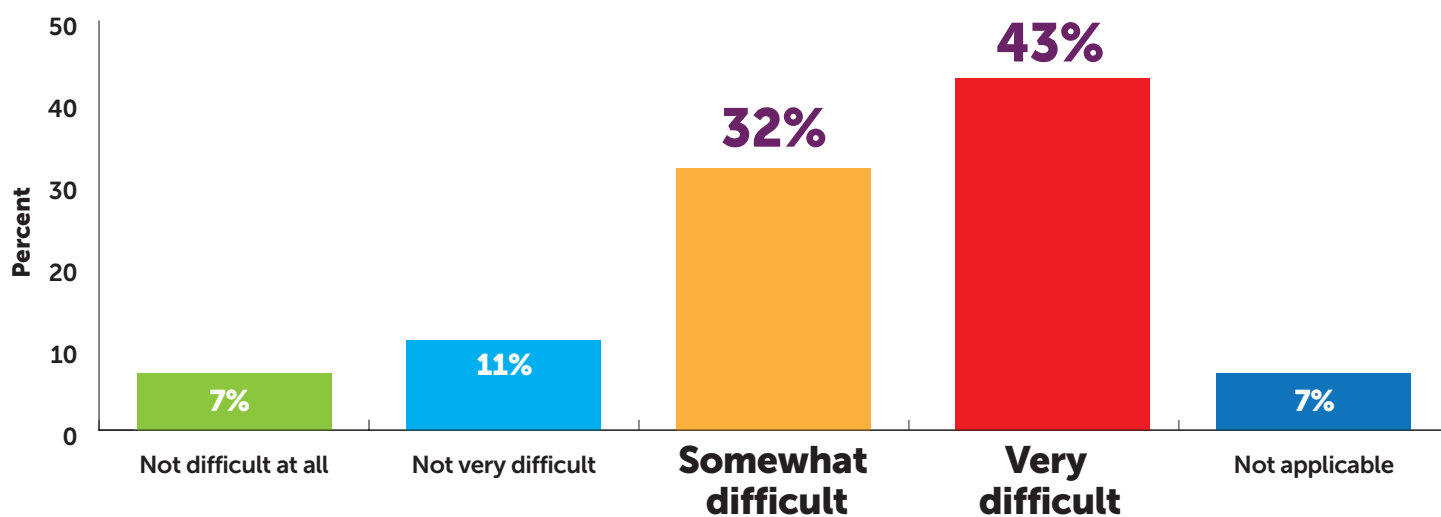
At the time of the survey, many women reported being housed, mostly in supportive housing. Women's access to adequate and safe housing is complex, however. 39.3% of women had spent at least one night outside in the last month, and 64.3% had stayed in a shelter in the past year. One quarter of women reported not feeling safe in their home environment (selecting *Not at all* or *A little*).



Nearly all survey participants (92.9%) reported receiving some type of income assistance. Even with this assistance, the majority of women found it difficult to live on their current income.



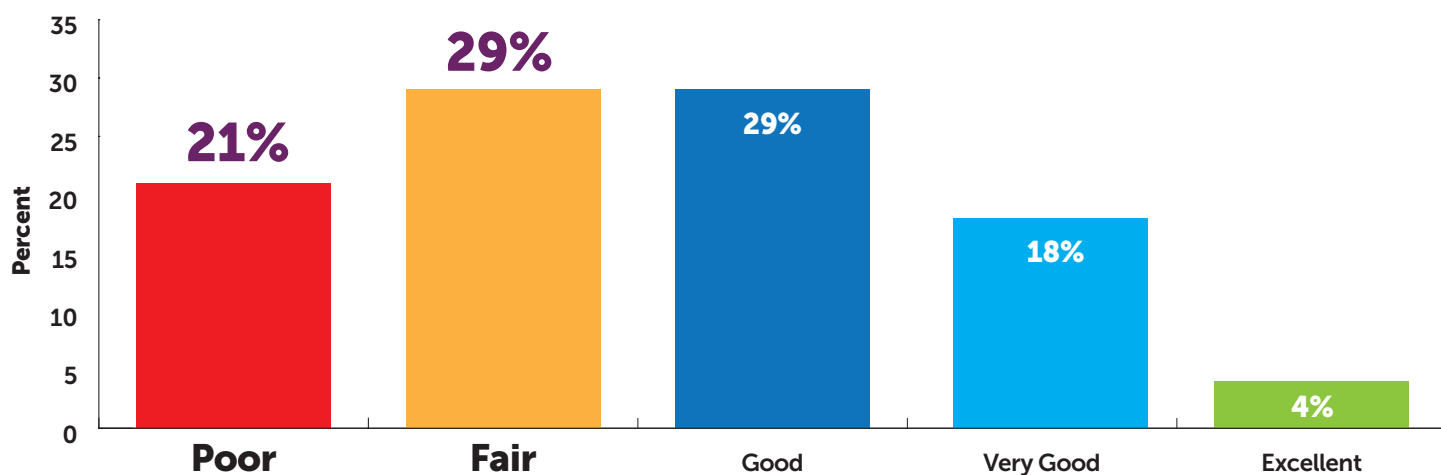
Financial strain (n=28)



Women's self-reported health varied, with half rating their health fair or poor. In general, Canadians rate their health much better, with less than 15% of the general population saying their health is fair or poor.¹

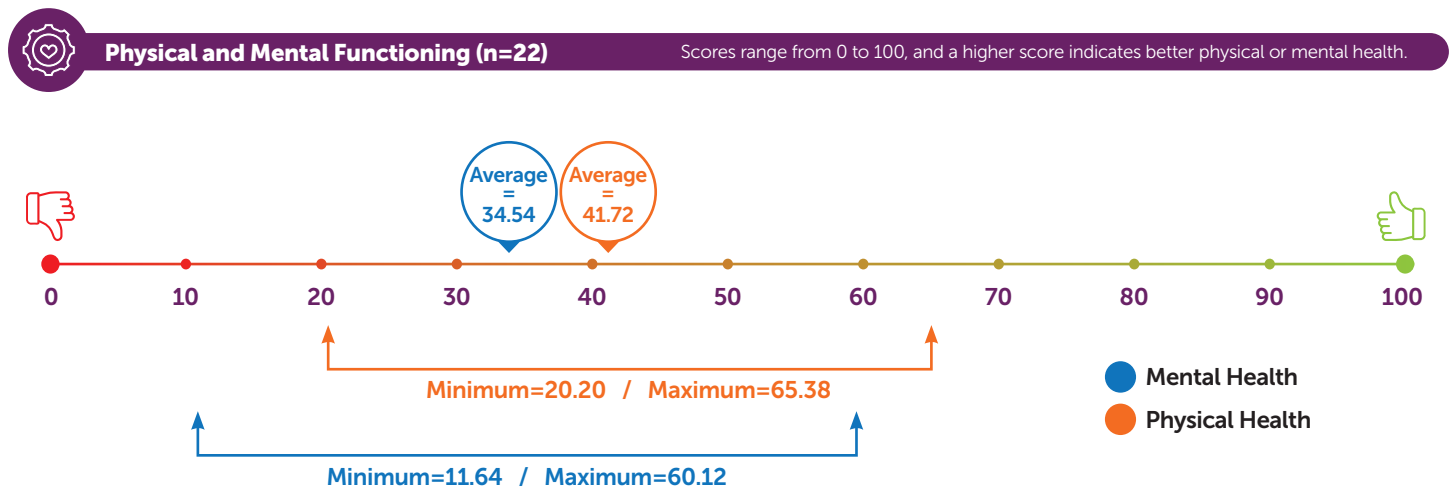


Self-reported health (n=28)

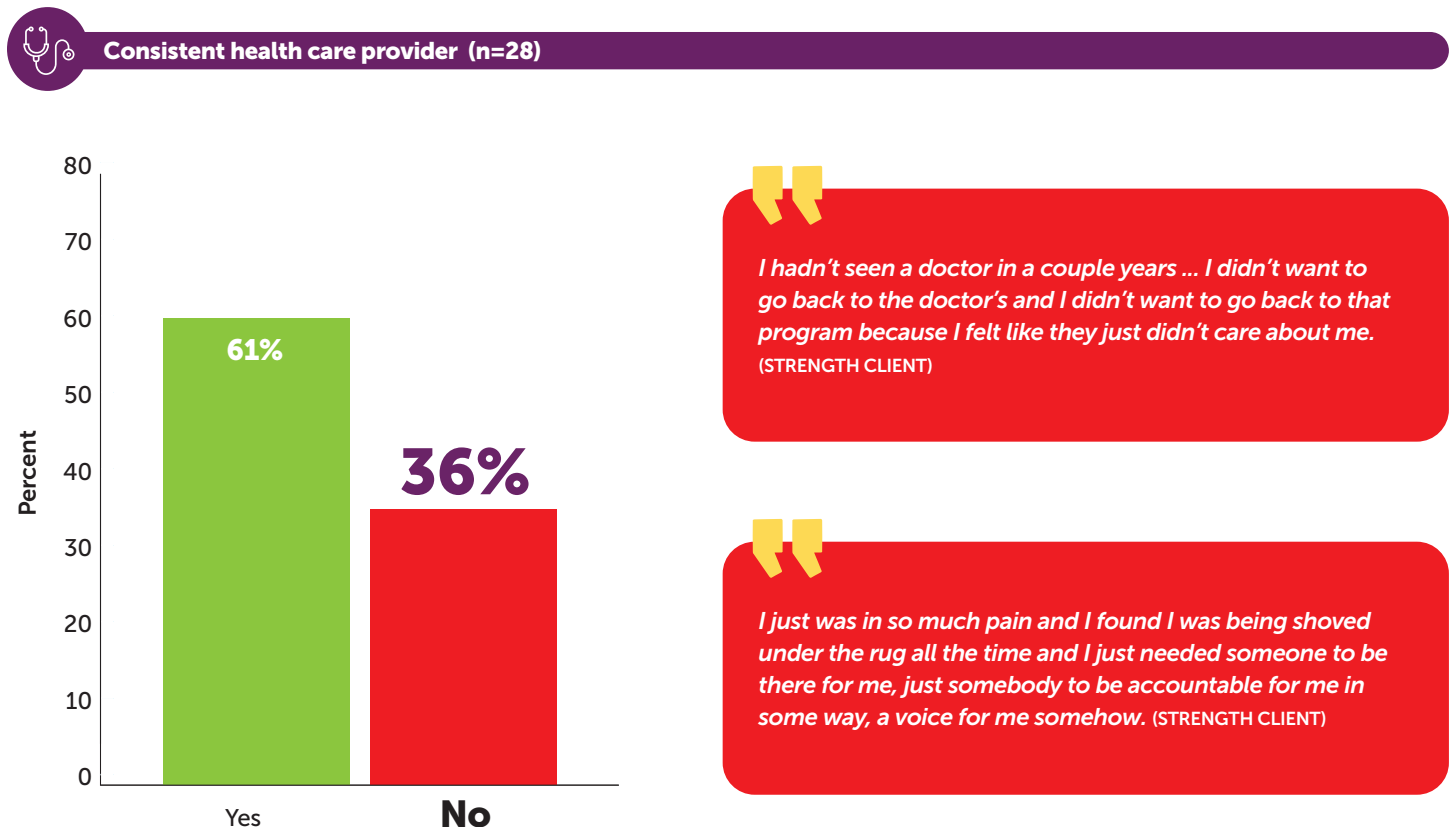


Things would change for me so easily in a day ... I have ten different kinds of diseases ... and that's a lot on my plate. So I really need help when I do this because it's so hard on me, on my body. When I have to come into hospital, I'm usually pretty sick. So I just need someone that will understand and care, not to judge me, just to come by. (STRENGTH CLIENT)

Women reported that their physical and mental health impacted their everyday lives.



Although women reported many challenges in their physical and mental health, many did not have a consistent health care provider and reported difficulty receiving care when they needed it. This may account for what we learned about women's use of an Emergency Department in the previous month.

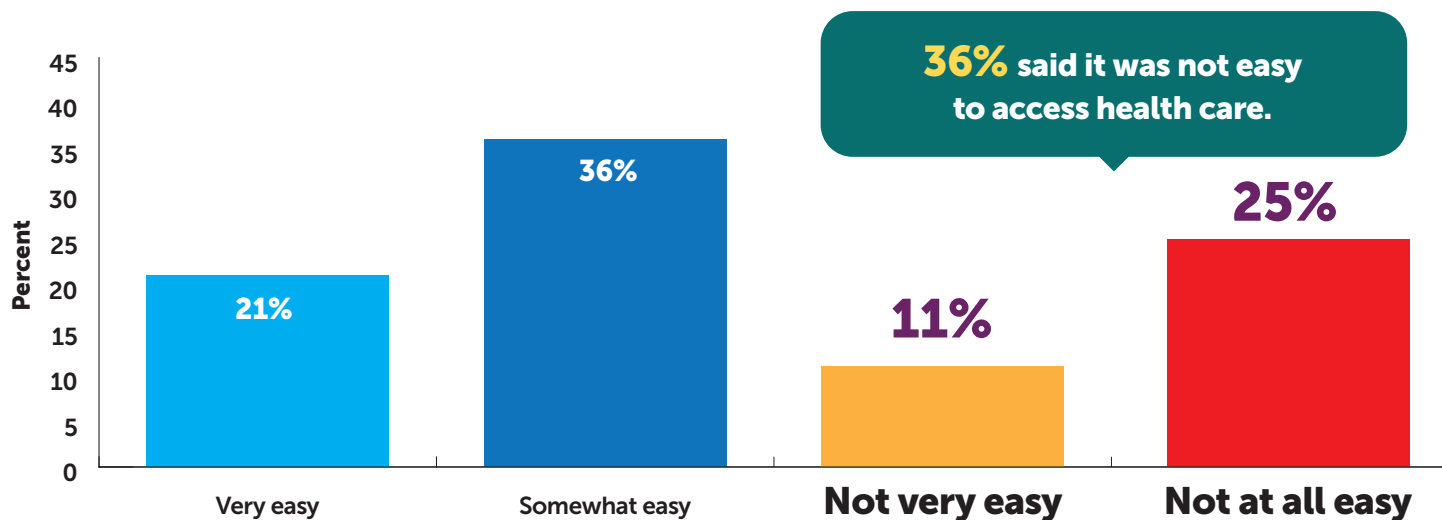




It was lifesaving because I was in a state where I was just so anxious and shaky that I couldn't do anything and I really needed help with everything. I was even scared to just go outside and it felt like running the gauntlet just going to the convenience store. (STRENGTH CLIENT)



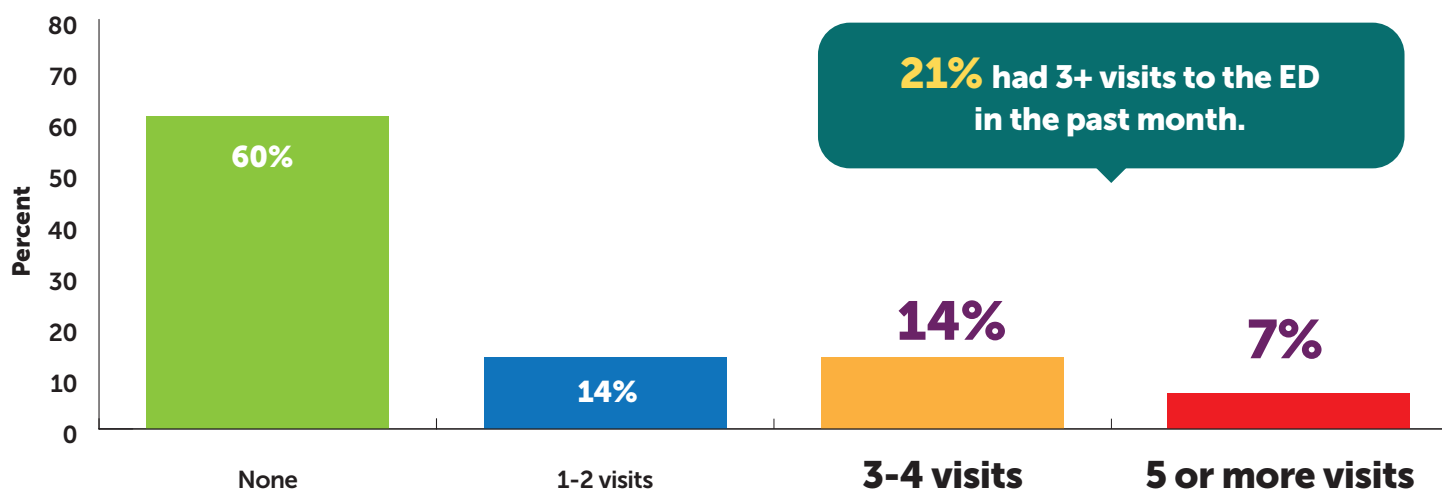
Ease of access to health care (n=28)



I just said 'look, I'm looking for a doctor.' It just first took a long time to get things going. Part of it was because the doctors weren't there and part of it was because other people said they'd do something and they didn't. (STRENGTH CLIENT)



Emergency Department use in the past month (n=28)

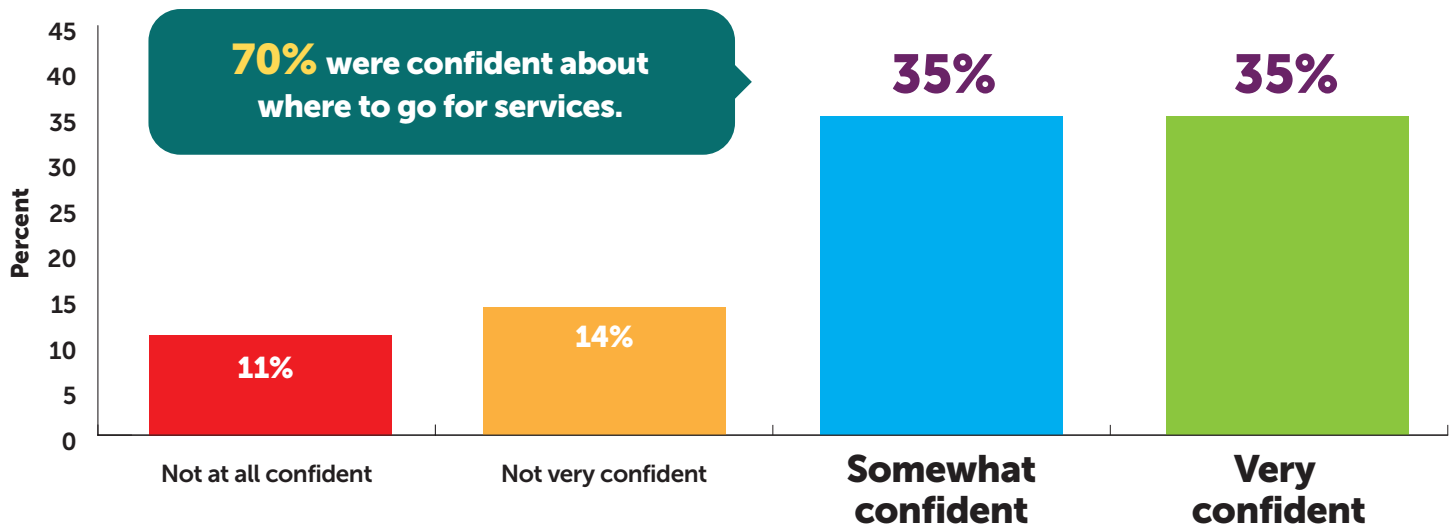


Women are resilient and resourceful

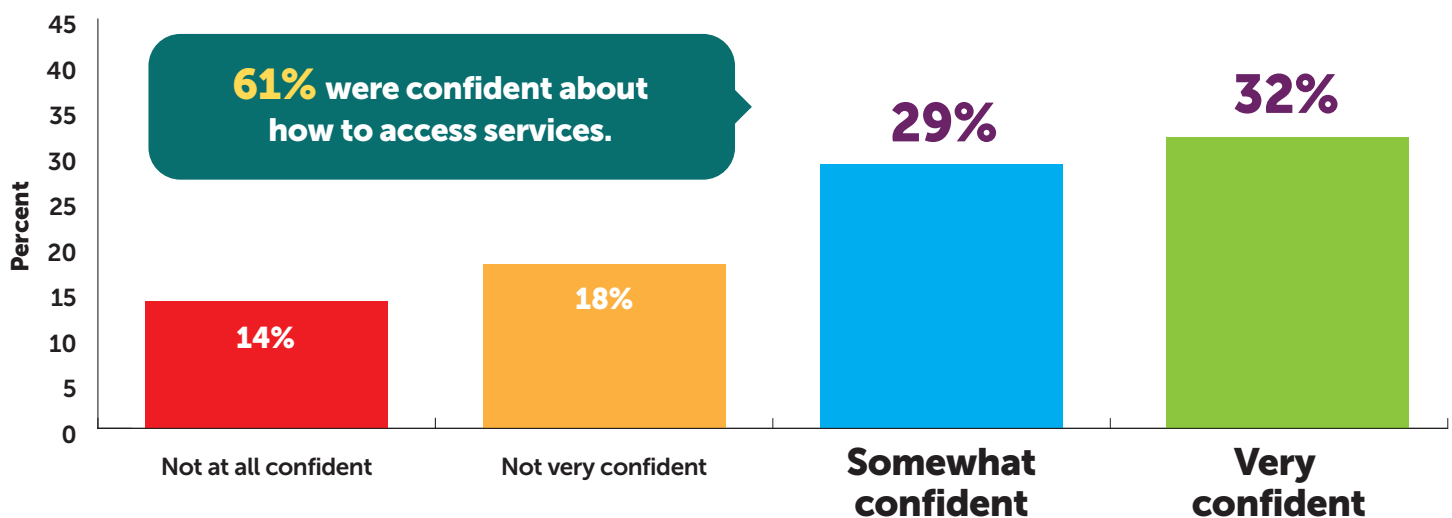
In keeping with our strengths-based approach we also learned a lot about women's navigation of services. When they first began working with STRENGTH, the majority of women we surveyed were confident about where to go and how to access services, and they had accessed various community-based services in the previous month. 21 women (75%) indicated that they had used community-based services in the last month including, for instance, such programs as meal drop-ins and women specific services.



Confidence in where to go for services (n=28)



Confidence in how to access services (n=28)

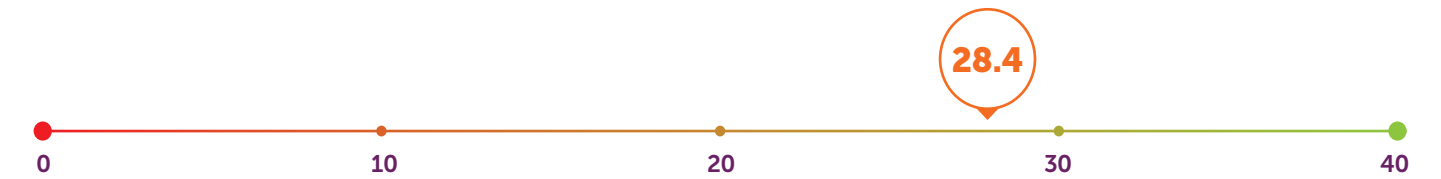


Even if they were confident and knew where to go, women needed help to get there. By participating in STRENGTH, women were able to mobilize confidence and work with their outreach team to get themselves to appointments and services.



Dealing with Situations

We asked women about how they respond to situations, including those that might be challenging. On a standardized measure for resilience, they rated themselves **moderately well** with an **average score of 28.4 out of 40**.

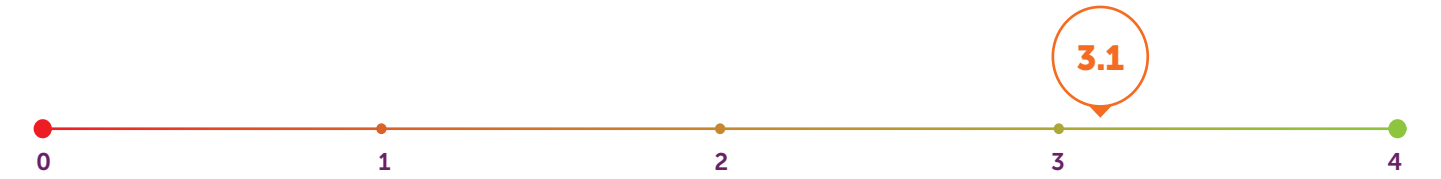


I'm very – a self-motivator. I'm pretty good at my resources myself. I haven't always been that way. It has taken 20 years to be like this. I believe anyone can do it because there is a lot out there, so it just takes perseverance and stuff. (STRENGTH CLIENT)



Navigating Everyday Life

We also asked women about how they navigate everyday life. They scored **quite high** in this area with an average score of **3.1 out of 4**.



Being Downtown Eastside is really hard for a woman. ... As a child I hadn't really ever asked for much. Now as an adult, I'm asking for all the help I can ... just to make it to my appointments and asking if I can get food hamper because my fridge is usually always empty. (STRENGTH CLIENT)

Participating in STRENGTH made a difference for women

When we spoke with them after they had been participating in STRENGTH for a while, women reflected on their experiences and growth in several key areas.



Meeting their goals

In interviews, women talked about how the STRENGTH team helped them to meet the goals they had set for themselves. **Nearly all of 19 women who were interviewed said they had attained more than 75% of those goals.**



If it wasn't for them I probably wouldn't have gotten into [food services] because, well it was taking longer; things would have been slower. ... Without backup, you might as well be going downstream. When you have somebody else helping you that kind of knows the different places or people, it's a lot easier. (STRENGTH CLIENT)



Access to health care and social supports

Over the time they engaged with STRENGTH, we saw shifts in women's confidence and ability to access health care and social supports. This showed up in the surveys they completed over time.

The number of women without a consistent health care provider dropped from

36% to 18%

Women also found it easier to make it to health or service appointments.

Only 27%

said it was not easy to make it to appointments at the third survey, down from **43% at enrollment.**

Women's confidence in accessing services **increased over their time with STRENGTH:**

70% → **91%**
were confident about **where to go for services** they needed at enrollment. were confident about **where to go for services** at the third survey.

61% → **82%**
were confident about **how to access services** at enrollment. were confident about **how to access services** at the third survey.



Personal impacts

Engaging with the STRENGTH program was meaningful for women, and they identified ways in which it had impacted them personally and changed their access and experiences with community and health services.



It made a difference because I would be able to make the appointment first of all and on time, and with my homework done, like things that I had to do, bloodwork before and everything. And it seemed like when she was in my doctor's office over at [clinic], the doctor would agree with simple things that I was requesting, but then appointments after that, if [the outreach worker] wasn't there, the doctor wouldn't follow through, so I appreciated her being there to kind of, I don't know, when she speaks or her presence was in the room, I seem to be able to get it across what I wanted to do because expression and finding the words to, even if I did have the words it wasn't going to go my way with who I was dealing with. (STRENGTH CLIENT)



[Knowing that I was able to help other women] made me feel great. Yeah it really did. I mean it made me feel energized. Gave me some happy, happy feeling inside that I was able to be part of other people getting joy and improve their wardrobe. (STRENGTH CLIENT)



What worked about STRENGTH

Women told us what worked about the program and we learned from women what they viewed as important to enable them to build and maintain relationships with the outreach team.



Having that person to help me with some of my barriers] makes me feel like I'm doing, accomplishing things, not just sitting back and just letting other people do it for me, but I'm also doing it as well. She's not doing it for me, she's doing it with me. (STRENGTH CLIENT)



When I give them a task or something, ... They looked into it and they followed through with it. It was continually following through. ... They get back to me. Constantly. ... They just continually built trust with me. (STRENGTH CLIENT)

- Start from, and continually build, trust
- Be consistent
- Show up when you say you'll show up
- Don't judge



Growth in the STRENGTH program

Women also spoke with us about their growth in the STRENGTH program and what it meant for them in their relationships to others in community.



I noticed a change in me is that, just building trust with women again, not that I, I just really didn't have trust in anybody. ... And boundaries and stuff too. ... Because I didn't have boundaries before. I just would exclude everybody. ... I give full credit to the STRENGTH project. ... It helped build trust in women, and men too. ... and I'm so grateful because they reinstated trust in women again. I've been able to build trust in other women who I've never had that trust before, like in other support systems.

(STRENGTH CLIENT)



But when you're coming from no trust of women whatsoever, especially I really had no trust in anybody, but women especially very much so. ... Maybe it was uncouth of me to do it. But really I didn't know I was doing it at the time. I didn't set it out intentionally, that's how I ended up building the trust with them. (STRENGTH CLIENT)



I was able to branch out and help others, definitely. And I noticed even they noticed that it's nicer to do it with a partner. ... Who wants to do shit alone? ... Life is just about growth and development and how we can better ourselves, and if you can't give it back or pay it forward, just sitting on something is boring. (STRENGTH CLIENT)

Conclusions

We built and implemented a model of outreach that was community-led, strengths based and integrated elements of trauma and violence informed care that recognizes systemic violence as central to understanding trauma and its relationship for women's lives. This meant an outreach program that met women where they were at and integrated their resilience and capacities in navigating their everyday lives. Trust in the program built over time, requiring that the outreach teams support women's active engagement in identifying their goals and the planning and implementation to meet these goals.



Next steps

Building upon the success of STRENGTH and in co-leadership with ICWIS, the team has secured funding to scale up this program in Vancouver and other cities across Canada. The pandemic context has created significant challenges in scaling up but also afforded us the opportunity to learn more about the safety and security of women in the community and requirements to support women's overall well-being. In Vancouver we launched the STRENGTH COVID-19 Bridge Project which has allowed us to continue to provide outreach services in the community.

The CAC has begun meeting again and are actively engaged in leading the development of a video to support other organizations and researchers to learn more about CAC leadership as an essential element of program success.

The next phase of the STRENGTH project will be launched in August 2021 and is expanding to new roles for community health workers. We are also expanding STRENGTH as an integral element of a more advanced outreach program that addresses women's priorities for health and social service and supports, and aims to foster mental well-being through regular social visiting and wellness checks within the community.



For more information about the content of this report or the STRENGTH program, please visit capacityresearch.ubc.ca or contact us at capacity.research@ubc.ca or 604-822-2852.