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ABSTRACT
                This report describes s a study that examined how seven
groups in Edmonton, Alberta, used a community development model called
Community Capacity Building and Asset Mapping. The first three sections
discuss the model's development and purpose and the methodology used to
examine its application in community planning. Presented next are the results
of the study's five research questions, which dealt with the following
issues: initiation of the community building effort; common elements used to
find and mobilize assets; factors determining the community building effort's
sustainability over time; the role of service providers; and funding needs.
The study's implications and limitations and questions for further research
are outlined in the final two sections. Contains 17 references. Appended are
the following: overview of the Community Development Office's mission and
activities; definitions of selected terms in the context of community
capacity building and asset mapping; the community capacity building and
asset mapping model; community development web page; information about the
participating communities and neighborhoods; profile of the firm Community
Building Resources; community capacity building and asset mapping workshop;
interview questionnaire; interview questionnaire rationale; community
building matrix; "next step" data; interview schedule; limitations from
capacity study reports; and timeline. (MN)

From model to reality— Community Capacity Building and Asset Mapping ©

FRIENDS SHARE
CONNECT POTENTIAL

Listen and learn... the answers are with communities!

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EXECUTIVE SUMMARY

Community Development has many meanings and elicits different interpretations and ways of practice for different groups of people. Most often, the differences lie in **who** the players are and what **their roles are**, the **approach** that is taken, and the **methods** used to bring the community together. The new Community Development Office (CDO) is an arm of the Capital Health Authority in Edmonton, Alberta, Canada. In the new community-centered health environment in Alberta and Canada, the CDO saw an opportunity and a challenge to ask new questions and assume new roles. The Glenwood community and this Community Development Office found a way that encouraged community citizens to find their gifts and abilities and opened doors to ways for shared responsibility and more local action - the Community Capacity Building and Asset Mapping© Model with the Capacity Study (now called the Steps to Capacity Success©). The essence of the Model and the Steps is a community engaging in conversation and discovery within itself, using a questionnaire and a series of steps that set the stage for Community Building.

This report describes a reflection in conjunction with the first seven of twelve groups who have used the Steps to Capacity Success©. The people from the seven groups were interviewed using a questionnaire that was developed to address five Key Questions about Community Capacity Building and Asset Mapping© and the Steps to Capacity Success©. The answers to these questions would then be utilized to increase the level of success of other Community Capacity Building and Asset Mapping© initiatives and to improve the practice of the CDO.

THE FIVE KEY RESEARCH QUESTIONS were:
1. **How and where did the initiative start in the community?**
2. **What were the common elements used to find the assets and mobilize them?**
3. **What determined the sustainability of the community building over time (1-3 years)?**
4. **Was there a role for a service provider and what was the role? Was there a role for a community builder and what was the role?**
5. **Did any elements of the Community Building require funding, and if so when was it received and who was the funder?**

Data were gathered using two methods: (1) in-depth, open-ended interviews with key community participants, and (2) the collection and analysis of written accounts and records located at the Community Development Office. The interview data were input on four databases using Microsoft Works 3.1.

The results showed:
KEY RESEARCH QUESTION #1: How and where did the initiative start in the community?
Initiatives started through gatherings which encouraged **"a new way,"** in an **atmosphere of sharing, learning, and discovery of each other's gifts, ideas, and interests, which ultimately led to relationships developing between citizens.**

KEY RESEARCH QUESTION #2: What were the common elements used to find the assets and mobilize them?
The Six Steps to Capacity Success© and the sub-steps were very useful as a vehicle for *finding* the assets and beginning the conversations that must happen between community citizens before

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Community Building can take place. The **Asset Map** and **people getting together and developing relationships** were most often mentioned as ways for *mobilizing* the communities' assets.

KEY RESEARCH QUESTION #3: What determined the sustainability of the community building over time (1-3 years)?
Five factors were identified as important to sustaining Community Building: (1) commitment, dedication, or perseverance; (2) being a part of an activity; (3) passion, honesty, and beliefs; (4) relationships; and (5) knowledge of community history and contacts. It was interesting that these factors seemed to emerge in some of the people as the Community Building progressed, and that others have them to start.

KEY RESEARCH QUESTION #4: Was there a role for a service provider and what was the role? Was there a role for a community builder and what was the role?
There seemed to be no clear separation between the CDO and others as community builders. The CDO was a spark and enthusiast for all seven communities and an administrator for five. All those involved, whether they were a service provider or community citizen, exhibited valued personal attributes such as: enthusiasm, positive thinking, perseverance, sense of humour, dedication, and the ability to take risks.

KEY RESEARCH QUESTION #5: Did any elements of the Community Building require funding, and if so when was it received and who was the funder?
The reflection seemed to show that funding can be an enabler for *mobilizing* community assets but may not help when it replaces the natural relationships built from the discovery of a community's gifts.

The key outcomes of this reflection were:
- Community Capacity Building and Asset Mapping©, with the Steps to Capacity Success©, works.
- Community Capacity Building and Asset Mapping© nurtures an atmosphere of discovery and sharing, from which community driven initiatives emerge.
- The Steps to Capacity Success© facilitate the building of relationships and encourage the emergence of key individual gifts that sustain Community Building - commitment, dedication, perseverance, passion, and honesty.
- The CDO has keener awareness and understanding of the impact of the CDO's involvement in, and withdrawal from, Community Building. The CDO learned that staying involved longer is not disabling, but forms long-lasting relationships.

Future plans for more research may include further interviews with more people from each of the seven communities and interviews with other groups involved in Community Building using Community Capacity Building and Asset Mapping© and the Steps to Capacity Success ©. Sharing this research through publication, and sharing the summary and full account with others will provide further building blocks for those involved in Community Building.

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REPORT:

LISTEN AND LEARN. . .
THE ANSWERS ARE WITH COMMUNITIES!

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I. BACKGROUND

Community development has many meanings and elicits different interpretations and ways of practice for different groups of people. Most often, the differences lie in **who** the players are and what **their roles are**, the **approach** that is taken, and the **methods** used to bring the community together. Traditionally, systems and service providers, particularly in health, have taken on the role of the "doer" of community development (Labonte, 1993). This approach has been focused on finding the "needs" and the "needy" of the community through methods such as needs assessments, focus groups, and town hall meetings - and then providing a service. Communities have been over-needs-assessed and over-serviced to the point where their independence and control is depleted and dependence is created (McKnight, 1987; Community Building Resources, 1997). The people and communities become weaker and powerless as a result (McKnight, 1995; Community Building Resources, 1997).

The Community Development Office (CDO) is an arm of the Capital Health Authority in Edmonton, Alberta, Canada (Appendix A: Who Are We?). Health, social, and economic reform have resulted in tremendous changes in the health care sector. Although there has been negativity within communities associated with these changes, one of the most exciting opportunities is the potential for community-centred health (CHA 1994). Since hospitals are no longer in the position to offer the same services that they once provided, it has become increasingly evident that communities must once again become responsible for their own health. As a result, a movement towards community-centred health[1] has finally begun. The emergence of community-centred health has the potential to create many local opportunities as communities actively participate in and nurture their own health and the health of their fellow community citizens (CHA 1994).

In this new community-centred health environment, the CDO saw an opportunity and a challenge to ask new questions and assume new roles - within communities and within "service." They chose to work in a context broader than narrowly defined health - freedom from illness - in a practice grounded on the belief that health is determined by factors beyond and including conventional health care (Canadian Insatiate for Advanced Research, 1991); they chose to practice within a philosophical framework that assumes everyone has a 'gift' to share with the community and everyone will have an opportunity to "give" their gift.

The CDO accepted the challenge to begin to ask different, more positive, questions that would encourage citizens and communities to find their gifts and abilities and open the door to new ways, including shared responsibility and more local action and power. In other words, the CDO was searching for a way to begin to focus on the potential and possibilities within local communities that would encourage communities to make a break from dependency on service - a way through which neighbourhood citizens, associations, and businesses could become the "doers" and drivers of community development; a way through which service and professionals fit

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[1] Community-centred, according to "Words, Words, Words" (Appendix B), means created and driven by individual citizens and community groups within their living context.

without being dependency-creating, and in which they could be a resource, a facilitator, and a catalyst to actions in the community.

The efforts of John L. McKnight and John Kretzmann (Kretzmann and McKnight 1993, McKnight 1995), the Asset-based Community Development Institute (1996), adult education (Smith 1995), and First Nations Community Liaison experiences (Erasmus and Ensign 1991) provided the theory base, support and guidance as the CDO group embarked on finding a new way. The words that the CDO began to learn and use included: community building, community action and animation, asset mapping, capacity study, asset-based community development, community capacity building, gifts, assets, capacities, interests, friendships, and relationship-building (Appendix B: Words, Words, Words). The CDO also created a dynamic list of resources and references, including web sites, books, and articles that have been useful as the group has learned and grown in the practice of Community Building.

The CDO began to search for a willing, open-minded, risk-taking community/ neighbourhood group to accept the challenge as well. The search was short; the CDO discovered the nearby community of Glenwood, which also wanted to learn new ways in working toward a more active and energized community. Together, the CDO and Glenwood began to learn and understand the asset focus - how to ask new asset-focused questions, how to hear exciting new answers, and how to find the gifts and abilities of citizens and the community. The discovery of these gifts and assets, it was hoped, would open the door to "new ways," shared responsibility, and more local action and power. The Glenwood community and the CDO decided to ask the Glenwood citizens a new question: *"what can you do?"* NOT *"what do you need?"* The theme or focus question that was asked of the Glenwood citizens was "what supports for health do you have, and would be willing to share with the citizens of your community?"

The CDO and the Glenwood community believed that this question would stimulate the discovery of the assets and capacities of Glenwood citizens and that connections and relationships would emerge to create an environment in which more citizens would become more involved in actions at the community level. Based on the successes of the Glenwood project, the CDO developed the Community Capacity Building and Asset Mapping© Model (Dedrick and Mitchell 1994). The first stage of the model is called a Capacity Study and includes six steps (Appendix C: Community Capacity Building and Asset Mapping© Model). The term Capacity Study is no longer used; it is now called the Steps to Capacity Success©. The Model and the Steps have since been posted on a Web Page (Appendix D: Community Development Web Page) and utilized by many groups in geographically defined communities, within corporations, and by segments of health and other social systems in various parts of Canada and the United States. The model and its philosophical framework has also been a resource to many communities in the United States, Australia, New Zealand, and Wales.

The essence of the Community Capacity Building and Asset Mapping© Model - with the Capacity Study (now called the Steps to Capacity Success©) - is a community engaging in conversation and discovery within itself using a series of steps and sub-steps, and a questionnaire. Through this process, communities, neighbourhoods, and citizens begin to construct and manage the discovery,

connection, and mobilization of local resources/gifts/talents and assets. Through the one-on-one conversations this process encourages, the level of local involvement and action progresses from information sharing, to linkages, connections, relationships, and, optimally, to friendships and the mobilization of local skills, abilities, and assets - Community Building. Doors are opened for more citizens from the community to come together to share and be active participants in community planning and to take an active role in making things happen.

The CDO has only three simple criteria for success in Community Building:

1. the community building is based on a recognition and celebration of the strengths of the community, rather than its deficiencies.
2. all activities or projects are ultimately determined and driven by community members, not by "outside" agencies, departments, or organizations.
3. the community building is sustained and long-term.

The CDO has been using the asset-based philosophy in its practice for three years and has been sharing the model since September 1994. The CDO is now searching for a way to show with some certainty that Community Capacity Building and Asset Mapping© works. A research "sounding board" was struck and over a six month period it became clear that a good starting point was to reflect and remember with community friends what had happened in their community, and how it had happened.

II. INTRODUCTION

This report describes the reflection from the responses and interpretations of interviews with the first seven of twelve groups (Anderson, H.J. and Scharle; M., Dedrick A.; Dedrick A. and Mitchell G.; Roberts, S. and Dedrick A.; Scharle, M and Roberts, S.; Stratford Community Resource Committee; Whitecourt and Community Capacity Study Team) who have used the Steps to Capacity Success©. These seven groups are those who embarked on their Community Building using the Steps to Capacity Success© between April 1994 and December 1995. Five of the seven groups are neighbourhoods/communities in Edmonton (Children's Services, Glenwood, Food Security, Millhurst and Oliver) one is in Whitecourt, Alberta, and one is from Stratford, Prince Edward Island (Appendix E: Participating Communities and Neighbourhoods: Background, Executive Summary, and Feedback Loop). Two of the seven groups are communities defined by interest and geography - Children Services and Food Security. The other five communities are geographically defined; two are small towns and three are Edmonton neighbourhoods. Each group has developed a local context for each step and sub-step, which means that the questions, questionnaires, and results varied a great deal.

Food Security, Glenwood, Millhurst, Oliver, Stratford and Whitecourt received support funding directly or indirectly from the health system to construct and manage the Capacity Study. Direct funding refers to an actual contract for someone to lead the Capacity Study, as in Whitecourt, where the contract was between the CDO and the local health authority, as well as in Stratford, where the contract was between the local health region and a small business called Community Building Resources (Appendix F: *"COMMUNITY BUILDING RESOURCES"*). Indirect

funding from health means that the CDO was a major player but there was not a contract through health, as in the other five communities/neighbourhoods. Children Services received funding for administration part way through the Capacity Study.

A one- or two-day Building on Capacities workshop was developed by the CDO as a way to provide a learning and sharing environment that would assist groups in understanding the asset-focused/Community Building thinking and the Capacity Study process in their community context (Appendix G: Community Capacity Building and Asset Mapping© Workshop). The workshops were delivered in the geographic community of the community group. One- or two-day workshops were delivered by the CDO to Children's Services, Stratford and Whitecourt. Workshops were not delivered to Glenwood, Food Security, Millhurst, and Oliver because these initiatives began before the workshop had been developed.

Representatives from each of these seven groups were interviewed to find answers to five key questions about Community Capacity Building and Asset Mapping© and the Steps to Capacity Success© and their effectiveness as a way of community building. The answers to these questions would then be utilized to increase the level of success of other Community Capacity Building and Asset Mapping© initiatives and to improve the practice of the CDO.

The CDO looked forward to talking and sharing with all their community friends and set out with anticipation and excitement to spend parts of four months talking, recording, sharing, reflecting, writing, and presenting.

III. METHODOLOGY

The work of the CDO with communities in the past three years has been based on a Community Capacity Building and Asset Mapping© Model, which begins with six Steps to Capacity Success©. A full description of these steps and the model is contained in Appendix C. The Steps to Capacity Success© centre around using a locally developed questionnaire, which asks about the group and individual skills/gifts/talents, interests, and resources and becomes the starting point for personal conversations between people, associations, and businesses.

Community Capacity Building and Asset Mapping ©

Community Driven Planning and Initiatives

Community Action

Community Animation

Community Connections Resource Base

Communicate #6
Putting It all together Asset Mapping #5
Conducting the Survey Data Inputting #4
Design Questionnaire and Data Base #3
Initiate #2
Define The Question and Find the Focus #1

September, 1997
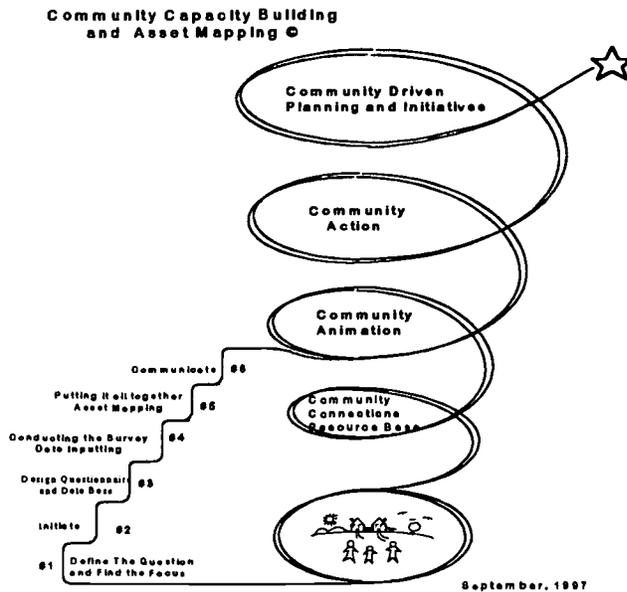
The Steps to Capacity Success©, in brief, are:

1. Define the question and/or find the focus
2. Initiating the Capacity Study
3. Designing the Questionnaire and data base
4. Conducting the survey and data inputting
5. Putting it all together- Asset Mapping
6. Communicating results

A questionnaire is used to discover the unique "gifts" of members, businesses, and other organizations. Each individual's experiences drawn from the Steps to Capacity Success©, as well as the community animation and action that follows, is unique. For this reason qualitative methods of investigation and reflection were used. Gathering qualitative information and attempting to draw conclusions from it presents many difficulties, including avoiding bias and generalizing from small sample sizes (Patton, 1987). As well, as the focus of the CDO is on the practice of Community Building, it was decided that the focus of this research was to be on improving community development practice.

KEY RESEARCH QUESTIONS were developed by the research team. These were:

1. **How and where did the initiative start in the community?**
2. **What were the common elements used to find the assets and mobilize them?**
3. **What determined the sustainability of the community building over time (1-3 years)?**
4. **Was there a role for a service provider and what was the role? Was there a role for a community builder and what was the role?**
5. **Did any elements of the Community Building require funding, and if so when was it received and who was the funder?**

To answer these questions, researchers gathered data using two methods: (1) in-depth, open-ended interviews with key community participants, and (2) the collection and analysis of written accounts and records located at the Community Development Office.

Sample

Seven community groups were selected for this reflection. Each had completed a Capacity Study based on the steps of the Community Capacity Building and Asset Mapping© Model between

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April 1994 and December 1995. Two individuals representing each of the seven groups, for a total of fourteen people, were asked to participate, based on two criteria:

1. whether they participated in the capacity study or any of the activities that followed it,
2. availability

Questionnaire Design

The researchers created a questionnaire (Appendix H: Interview Questionnaire). Each question in the questionnaire was matched to a key research question (Appendix I: Interview Questionnaire Rationale). The questionnaire also referred to information contained in a "matrix" of the Steps to Capacity Success© and a list of activities and events that occurred after the Capacity Study (Appendix J: Community Building Matrix). This matrix and list are described in "Written Accounts," below.

Written Accounts

The Steps to Capacity Success© are also further broken down into sub-steps (Appendix C: Community Capacity Building and Asset Mapping © Model). All of the Community Building efforts of the seven groups were based on these Steps and sub-steps. A "matrix" listing each sub-step was compiled for each community. Based on written accounts, the matrix showed whether each community group had completed that sub-step and who had been involved in each sub-step (i.e. the community group and/ or the Community Development office). Researchers first asked each interviewee about their memories of the Community Building in their communities. Only *after* they had had an opportunity to answer, without prompting, was this matrix used to assist the interviewees in recalling the "common elements used to find assets and mobilize them" (Key Research Question #2) and to evaluate the effectiveness of each sub-step.

As well, a list of activities and events (and the dates they happened) that had occurred *after* the completion of the Capacity Study (the "Next Steps" from the Model, see Appendix C), as recorded at the Community Development office, was compiled for each of the seven community groups (Appendix K: "Next Steps" Data). These were read aloud to the interviewees. They were asked to confirm the events and activities and to add to the list, if possible.

Interviews

Each interview was conducted by two researchers; one acted as an interviewer and one as recorder. Three researchers in total conducted the interviews. One researcher was the interviewer in all but two cases (Appendix L: Interview Schedule). In almost every case, the two researchers conducting the interview had enough knowledge of each project to be able to effectively conduct the interview, while having had little or no involvement with the Community Building process itself.

The interviews took place over a period of five weeks, from May 16 to June 20, 1997. After being piloted on the first two interviewees, the researchers altered the questionnaire slightly to obtain a greater depth of information. Two of the fourteen interviews were conducted over the phone, while the remainder were conducted in person (Appendix L). Each interview was recorded on cassette.

Databases

The researchers entered interview data on databases using Microsoft Works 3.1 during the same five week period. Four databases were required to contain the extensive information from the fourteen interviews. To ensure the most complete and accurate data collection possible, researchers based the data entry on the written notes of the interviewer and the recorder and the audio tape for each interview, if possible. The researchers found it necessary to expand the size of the database fields several times to accommodate longer interviews.

Data from the interviews were grouped according to which Key Research Question it answered. Reports from the database were created for each Key Research Question.

Analysis

Each interviewee was given a "tag." Within this report, individual responses are identified using these tags. Each individual's tag is found in Table 1:

Community	_Tag_	
Children Services	C1	C2
Food Security	F1	F2
Glenwood	G1	G2
Millhurst	M1	M2
Oliver	O1	O2
Stratford	S1	S2
Whitecourt	W1	W2

The data for each Key Research Question were then grouped according to themes. Every effort was made to ensure no significant responses were lost. Together, the researchers then discussed and refined these themes.

IV. RESULTS

For the data presented in the results section, the researchers attempted to balance the quantity of responses with the quality of responses. To accommodate this balance, results are grouped according to theme of response for each question. As a result, interviewees responses are often mentioned in more than one theme, as they may have given several responses to one question. Interviewees not commenting on the usefulness of a sub-step either did not remember being a part of that activity, or their community did not use that sub-step.

KEY RESEARCH QUESTION #1: How and where did the initiative start in the community?

In order to determine how and where the initiative started, fourteen interviewees (two from each of seven communities) were asked **Interview Question 1: "If you think back to when your community group first began looking at its strengths and assets, when and how did it start?"**

Seven interviewees described how the process of looking at strengths and assets began. Of these, five (G1, M1, O2, W1, W2) indicated that they or their organizations were approached by someone at the **Community Development Office** to start looking at the community's strengths and assets. All five indicated that they were approached either by phone or in person. Two interviewees (O2, W2) described how a gathering of interested community members was set up after this initial contact with the Community Development Office.

Four interviewees (G2, M2, O1, S2) indicated how they personally got involved in the Capacity Study and subsequent activities, not how the group itself began to look at assets and strengths[2].

Three interviewees (C2, F1, F2) said that the initiative began as a result of meetings organized by a **government agency** or **institution**. One interviewee (C2) described how a working group of which she was a part "started talking about a Capacity Study because they wanted to get into a different way [of gathering information] and get information from different people who are usually identified when needs are identified; people who weren't service providers." Both interviewees involved in the Food Security study (F1, F2) described a meeting organized by a hospital in downtown Edmonton as the starting point for their initiative.

Two individuals (S1, C1) answered this question by describing the Capacity Study process. One interviewee (S1) indicated that the way their group began looking at strengths and assets was at a workshop given by two people from the Community Development office, when they "began talking about questions and a questionnaire."

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[2] This was perhaps because they were not involved in the group from the beginning and could not comment on how it began.

KEY RESEARCH QUESTION #2: What were the common elements used to *find* and *mobilize* the assets?

Find the Community's Assets

In order to determine what the common elements communities used to *find* their assets, interviewees were asked to answer **Interview Question 2: "What were the ways or steps that you used to discover your community's strengths and get people involved in what you were doing?"**

The responses to the question fell into two general categories of ways of finding community's assets. In the first category, **the "Steps to Capacity Success"** were identified by eleven of fourteen interviewees (C1, C2, G1, G2, M1, O1, O2, S1, S2, W1, W2) as the way they used to find their assets. They identified a variety of specific sub-steps within that broad "way" of discovery. Some examples were: "we made a survey and got volunteers to go out and survey people" (C1), "we gathered the resources that were already there" (C2), "listing business" (G2), "the data was compiled in a database" (O2), and "we used the Asset Mapping process when looking at how to group things together" (S1), and "the workshop was really important" (S2).

The second category of responses to this question included four of fourteen (G2, O2, W1, W2) interviewees. These four identified that **talking** was a way of finding their assets, reflected in statements such as "brainstorming at a meeting" (G2), "getting to know our neighbours" (O2), or "melding of minds" (W2).

> "It was eye-opening - some people found it difficult to find ways to get involved. Reaching out and talking led to a melding of minds" (W2)

Once the community citizens had shared their memories about the ways they found the community's strengths, the interviewer referred to the CDO's record of the steps (using the Six Steps to Capacity Success© and its sub-steps) the community took. For each sub-step, the interviewee was asked to comment on its usefulness[3]. The number of interviewees that found each sub-step useful, not useful, or did not answer that question are listed in Table 2, p. 19. The following outlines the responses in detail in relation to each sub-step of the six Steps to Capacity Success©.

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[3] The results of interviewees' responses to the question about a sub-step's usefulness are recorded for each. The sum of the responses (including "yes," "no," or "no response") will always total fourteen. The qualitative statements regarding why each step was useful will not always total fourteen, as not every interviewee commented on each step. Again, interviewees may have had several comments to each question, and, as a result, may be mentioned more than once in the qualitative results.

I. Define the Question	Useful YES	Useful NO	NO RESPONSE
Define Question	6	1	7
Participate in a Community Capacity Building and Asset Mapping© Workshop	7	0	7

Of the fourteen interviewees, six said that **defining the question** was useful, one said it was not, and seven did not respond to the question. Six of fourteen (C1, M1, O1, S1, S2, W1) interviewees described this sub-step as useful in giving a sense of direction and unity, while broadening the picture of what the group could focus on. One caution about language did arise. One interviewee, whose community initially focused on "health," saw this as a limitation to the creativity and outcomes of that initiative; it made it "tougher to think of anything else. . . . you're always thinking about what this has to do with health. This may have been why it was tougher to get an end result after the first attempt" (G1).

> "[The workshop was] pivotal! It was the most important thing. It helped people focus on a sense of direction, what it was they were doing, and what made sense" (S1).

Of the fourteen interviewees, seven said that **Participating in a Building on Capacities Workshop** was useful, none said it was not, and seven did not respond. Two of the fourteen interviewees (C2, S2) said that participating in a Building on Capacities Workshop provided them with a sense of direction in what they were doing. Two others of the fourteen (M2[4], S2) said it also encouraged individuals to see things differently, as in seeing the positives of what the community has versus its deficits. One interviewee (S1) mentioned that the group got to know each other; they ironed out issues between paid and volunteer members and their expected roles.

> "The workshop helped me to see things differently" (M2).

II. Initiate	Useful YES	Useful NO	NO RESPONSE
establish key community contacts	9	0	5
refine question	4	0	10
conduct a walkabout and gather information for a community profile	7	0	7
make use of existing research resources	9	0	5
confirm geographic boundaries	8	0	6
inform community members (i.e. newsletter, media)	10	0	4
develop goals and objectives	8	0	6

Nine of the fourteen interviewees said that **establishing key community contacts** was useful, while none said it was not useful and five did not respond to the question. Four of the fourteen

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[4] This interviewee did not participate in a workshop as part of the Millhurst Capacity Study, but rather is referring to a Building on Capacities workshop conducted with a group in that community after the Capacity Study was completed.

interviewees (C1, F1, G1, O1) identified that this sub-step helped to know what is going on in the community, in order to make referrals, gather information for planning, and make contacts. One interviewee (S1) stated that their community group actually impacted the town plan, causing a whole section devoted to healthy communities to be included. Another interviewee (W1) said that this step had the effect of providing the impetus for the discovery of the community's gifts; it included and recruited the "movers and the shakers." One interviewee (C2), whose response was generally positive, commented on that group's struggle with valuing information equally-- "my needs are more important than your needs."

Four of fourteen interviewees said that **refining the question** was a useful step, while none said it was not useful and ten did not respond to the question. This sub-step was seen by three of fourteen interviewees (C1, G1, W1) to be useful in clarifying and defining what was being done. It was also identified by one interviewee (G1) as having the effect of including more points of view and more ideas in the focus or question. One community person (M1), however, found that this process of refining became too "nit-picky."

Seven of fourteen respondents said that **conducting a walkabout and gathering information for a community profile** was useful, while none said it was not useful and seven others did not respond. Four interviewees (C1, C2, F1, M1) said that this sub-step was useful in giving a feel for the community. One interviewee (C2) found that it was a useful personal experience. Another (C2) said that it keeps you from making assumptions. The walkabout was also identified by one person (O2) as giving a broader picture of community, including how many companies, people, and houses physically exist in the community.

Nine interviewees said that **making use of existing research resources** was useful, while none said it was not useful and five did not respond. Four of the fourteen interviewees (M1, O1, O2, S1) identified that this sub-step was useful in gathering more information. One of these individuals also identified it as a place to start (M1). One interviewee said that it reduced the work by building on what other groups and people have done (C2). Another interviewee (W1) mentioned that it also provided many surprises about what is out there. However, one interviewee (G1) stated that this information is only useful as a reference, and that it has to be used along with other information before it becomes meaningful.

Eight interviewees said that it was useful to **confirm the geographic boundaries** of their community, while none said it was not and six did not respond. This sub-step was seen by three of fourteen interviewees (G1, M1, O2) as a useful way to focus the study. One interviewee (C1) said the boundaries also provided a framework for dividing up the community amongst surveyors.

Ten interviewees said that **informing community members** was a useful step, while none said it was not and four did not respond. Four of fourteen interviewees (C1, S1, S2, W2) identified this sub-step as important in letting people know what is going on. One person (W1) said it also made it easier to "get in the door" when they were conducting the surveys. It was identified by three interviewees (G1, O2, W2) as a way to get and keep people involved, including more

volunteers and contacts. On interviewee (F1) mentioned that their group found that personal invitation was most useful in engaging people.

Eight interviewees said that the **development of goals and objectives** was useful, while none said it was not and six did not respond. Five of fourteen (O2, S1, S2, W1, W2) said this sub-step served the purpose of telling and reminding the community group what they were striving for. As one community member said, "otherwise you swim in the ocean" (W1). One person (S1) said that goals and objectives help to maintain momentum. They were also seen by one person (O2) as a way of evaluating the community group's success once the study was completed.

One caution an interviewee (M1) presented was that it was felt by some that the goals and objectives were set by the "outsiders;" as a result, they were "a little taken aback by the assumptions that were being made" (M1). The interviewee did, however, say that the goals and objectives themselves were important to have, but that they should have been developed more in concert with the community.

III. Design Questionnaire and Database	Useful YES	Useful NO	NO RESPONSE
design questionnaires for individuals and businesses/associations	10	0	4
match questionnaire to database	6	1	7
set up a separate database for each questionnaire	5	1	8

Ten interviewees said that it was useful to **design questionnaires for individuals and businesses**, while none said it was not and four did not respond to the question. Four of fourteen interviewees (G1, O2, S1, S2) identified this sub-step as useful in providing a standard questionnaire with which to gather the same kind of information from everyone in the community. It was also identified by one person (W1) as a way to reach the communities' goal of talking to many people. A caution about the design of the survey presented by one community person (C2) was that the questionnaire is limited if there is no consensus as to its purpose. Another interviewee (M1) mentioned that some respondents to the individual questionnaire were offended by its bluntness, and one of the interviewees (C2) said that the questionnaire's language was exclusive, particularly to teenagers.

Six interviewees said it was useful to **match the questionnaire to the database**, while one said it was not and seven did not respond. There was little comment from community members about this sub-step. The interviewees that did comment (F1, M1, C1), said that it was useful for keeping tabs on the information and for what it told about the community. One person (S2) mentioned it was also useful for their community, which is planning to re-contact those who expressed interest in various initiatives.

Five interviewees said that it was useful to **set up a separate database for each questionnaire**, while one said it was not useful and eight did not respond. This sub-step also elicited little comment from community citizens. The only comment was by one interviewee stating that the databases were useful when "the community went back and started something" (G1).

IV. Conduct the Survey	Useful YES	Useful NO	NO RESPONSE
develop a list of all businesses and associations	11	0	3
develop a paper description	10	0	4
develop an interviewing plan	7	0	7
conduct volunteer training sessions	8	0	6
conduct questionnaire with project partners	6	0	8
connect with and interview key community people	9	0	5
conduct questionnaire with the owner or manager	9	0	5
expand list of businesses and organizations	3	0	11
conduct questionnaire in person	10	0	4
make the information sharing mutual	9	0	5

Eleven interviewees said it was useful to **develop a list of all businesses and associations**, while none said it was not useful and three did not respond. Three of fourteen interviewees (G1, M1, O1) said that this sub-step played an awareness and connecting role of what services and businesses already exist in their communities. Two interviewees (M1, W1) mentioned that the numbers and nature of the resources in the communities often came as a surprise to community members. One interviewee (C2) also noted that this list was much broader than normal directories, which usually either include only services or only businesses.

Ten interviewees said that it was useful to **develop a paper description**, while none said that it was not and four did not respond. Six of fourteen interviewees (C1, F1, O2, S2, W1, W2) said that this sub-step was useful in letting people know what the community group is doing. Two of fourteen (M1, W1) said it was useful as a preview to the actual surveys - so that people knew that they were going to be surveyed. One person (W1) said that some community survey volunteers also used this description as a basis for their spiel in introducing themselves.

Seven interviewees said that it was useful to **develop an interviewing plan**, while none said that it was not and seven did not reply. Three interviewees (M1, O2, S2) mentioned that this was also an opportunity for the communities to decide on the interview focus - whether to interview a broad cross section or a percentage of population. Two interviewees (C1, S1) said that this sub-step gave them an opportunity to make decisions about who to interview, and how many questionnaires each volunteer would do, and to decide whether or not it was necessary to recruit more people to help with the interviewing.

Eight interviewees said that it was useful to **conduct volunteer training sessions**, while none said that it was not and six did not respond. Six of fourteen interviewees (M1, O2, S1, S2, W1, W2) said this sub-step increased the level of comfort in those conducting

interviews, as well as giving them a chance to ask questions about the survey or to make any changes on the questionnaires if they so wished. One interviewee (C1) identified this step as being useful in giving volunteers a wider concept of what they were doing, how to explain it, and how to approach people, especially given the sometimes personal questions on the questionnaire.

Six interviewees said that it was useful to **conduct the questionnaires with project partners**, while none said it was not useful and eight did not respond. Three interviewees (C2, S2, W1) stated that people learned interesting things about one another that they would never have known had they not talked using the survey, even though they had been together as a group for a long time already. This step was also identified by two of fourteen interviewees (O2, S2) as being useful in giving people confidence in doing questionnaires.

Nine interviewees said that it was useful to **connect with and interview key community people**, while none said it was not and five did not respond. Six of fourteen interviewees (C1, C2, F1, O2, S1, W2) said this sub-step was a good place to start in gathering information and support. One interviewee (F1) said it also provided a more well-rounded approach; including more people provided more opinions and ideas from a broader range of perspectives.

Nine interviewees said that it was useful to **conduct questionnaires with the owner or manager of a business**, while none said it was not and five did not respond. Interviewees identified that it was preferable to conduct the questionnaires with the owner or manager of a business, rather than an employee or staff person. The outcomes identified by three of fourteen interviewees (O1, O2, S1) included getting better information about what the business did, and about donations by talking to the owner or manager, rather than a transient contact with an employee. Three interviewees (C2, F1, S1) mentioned that it was also possible to learn how the business saw itself and its contributions to the community, which "the community may have not have thought of" (S1).

Three interviewees said that it was useful to **expand the list of business and organizations**, while none said it was not and eleven did not respond. Community citizens did not have much comment on this sub-step. Two interviewees (M1, W1) mentioned that there were some surprises; one person (M1) said she was "astounded by the number of businesses and associations in the community." One interviewee (C1) said that it was helpful in beginning to network.

Ten interviewees said that it was useful to **conduct the questionnaire in person**, while none said that it was not and four did not respond. Two of fourteen interviewees (O1, G1) said that conducting the questionnaire in person made it easier to develop a relationship. Two others (O2, S2) said these in-person interviews got better information, as well as allowing the interviewer to explain the purpose, process, and goals of the study

itself much more clearly and ensuring it was understood. One interviewee (W2) said it also allowed contact with people communities do not usually hear from--those that do not come out to meetings or become involved easily.

Nine interviewees said that it was useful to **make the information sharing mutual**, while none said it was not and five did not respond. This sub-step was identified by three interviewees (G1, O2, W2) as useful in creating trust, which resulted in the citizen being more at ease and therefore more willing to share about themselves. Two interviewees (M1, S1) said this facilitated connections and networking all the way through the study, and reminded the community not to forget the smaller organizations in the community. One interviewee (W1) mentioned, however, that this sharing was sometimes difficult because the length of the conversation became almost intrusive into the time of the person they were surveying and they "didn't want to be a pain."

V. Putting it all Together	Useful YES	Useful NO	NO RESPONSE
create an Asset Map	9	1	4
describe efforts in a written account	10	0	4

Nine interviewees said that it was useful to **create an Asset Map**, while one said that it was not and four did not respond. Four interviewees (F1, G1, O1, O2) commented that while the information was on the database, the asset map provided a visual description, and a broad description of what was out there. Three of fourteen interviewees (M1, S2, W2) said that the asset map gave a greater appreciation for the community as a whole, and it was part of the learning, discovering--an "eye-opener." One interviewee (S1) said that it was also useful as a way of spreading the word about what people in the community could do. One community citizen (W2) described taking it everywhere he went, and seeing it posted in business locations in the community.

> "I liked the layout - following the trails and groupings. There were many surprises" (W2).
> "A very valuable way of spreading the word of what people could do" (S1).

One community person described the asset map as impractical and "all right to impress bureaucrats, government, and funders, but not someone who's a real community worker" (M2).

Ten interviewees said that it was useful to **describe efforts in a written account**, while none said that it was not and four did not respond. Five interviewees (C1, G1, O2, S1, W1) found this sub-step to be a useful way of putting all the information together, as well as describing what had happened, for people outside the community who were interested in the process. Three of the fourteen interviewees (M1, S2, W1) said that the final report served to provide a sense of accomplishment and closure to the study.

VI. Communicate	Useful YES	Useful NO	NO RESPONSE
develop a summary and send to all respondents	10	1	3
present copies of final report to all key parties	9	0	5
communicate the results with groups inside and outside the community/ies	5	1	8
keep a record of to whom the written account and summaries have been sent	4	0	10

Ten interviewees said that it was useful to **develop a summary and send it to all respondents**, while one said that it was not and three did not respond. Two interviewees (G1, M2) felt that this sub-step made people feel that their input was important, which in turn would make it more likely that they would participate again. This "feedback loop" was also felt by one person (O2) to validate the study. In terms of informing the community about what had gone on, the summary was seen by three interviewees (C1, S2, W2) to be valuable because people were curious about the results, but not everyone would take the time to read the report.

Nine interviewees said that it was useful to **present copies of the final report to all the key parties**, while none said that it was not and five did not respond. Four interviewees (C2, G1, O2, W2) said it was also a good resource for those groups who received a copy. Three of the fourteen interviewees (F1, S2, W1) found that this provided them with a sense of accomplishment. One interviewee (F1) said that the final report served to affirm the groups existing ideas about the community. One caution that a community person (M1) raised was that the language in the report was sometimes too technical and confusing for some people, and that there needed to be a balance between the technical and plain language.

Five interviewees said that it was useful to **communicate the results with groups inside and outside the community**, while one said that it was not and eight did not respond. Two interviewees (C1, O2) felt that it was useful for those groups as another resource, while one person (C2) said that this wasn't useful, but that it was necessary to fulfill commitments.

Four interviewees said that it was useful to **keep a record of to whom the written account and summaries have been sent**, while none said it was not and ten did not respond. One interviewee (O2) said it was useful to give an idea of who wanted the information. Another person (W1) said it served the purpose of avoiding duplication.

Table 2: Responses Interview Question about the usefulness of each of the Sub-Steps in the Steps to
Capacity Success©

The Six Steps To Capacity Success and their Sub-Steps	Useful YES	Useful NO	NO RESPONSE **
Step 1: Define Question			
Define Question	6	1	7
Participate in a Community Capacity Building and Asset Mapping© Workshop	7	0	7
Step 2: Initiate			
establish key community contacts	9	0	5
refine question	4	0	10
conduct a walkabout and gather information for a community profile	7	0	7
make use of existing research resources	9	0	5
confirm geographic boundaries	8	0	6
inform community members (i.e. newsletter, media)	10	0	4
develop goals and objectives	8	0	6
Step 3: Design Questionnaire and Database			
design questionnaires for individuals and businesses/associations	10	0	4
match questionnaire to database	6	1	7
set up a separate database for each questionnaire	5	1	8
Step 4: Conduct the survey			
develop a list of all businesses and associations	11	0	3
develop a paper description	10	0	4
develop an interviewing plan	7	0	7
conduct volunteer training sessions	8	0	6
conduct questionnaire with project partners	6	0	8
connect with and interview key community people	9	0	5
conduct questionnaire with the owner or manager	9	0	5
expand list of businesses and organizations	3	0	11
conduct questionnaire in person	10	0	4
make the information sharing mutual	9	0	5
Step 5: Putting in all Together			
create an Asset Map	9	1	4
describe efforts in a written account	10	0	4
Step 6: Communicate			
develop a summary and send to all respondents	10	1	3
present copies of final report to all key parties	9	0	5
communicate the results with groups inside and outside the community/ies	5	1	8
keep a record of to whom the written account and summaries have been sent	4	0	10

** NOTE: Interviewees not responding to the question about whether or not the sub-step was useful
either did not use the sub-step or did not remember the step having taken place.

In addition to the interview data regarding the efficacy of the Steps to Capacity Success©
and the sub-steps in finding the community's assets, the researchers also drew information
from the final reports from the seven communities which mentioned challenges and
limitations faced in discovering their community. This list of challenges (Appendix N:
Limitations from Community Capacity Study Reports) provides another perspective in
addition to that of the interviewees regarding the use of the Steps to Capacity Success© in
community building.

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Mobilize the Community's Assets

In further answering Key Research Question #2, the researchers focused on the common elements in the _mobilization_ of community. Interviewees were asked **Interview Question 4(a) "What has been happening in your community since the Capacity Study was completed, that you feel may be related to the Capacity Study?"** The answers fell into the two broad categories of **initiatives** and **relationships forming**.

Nine interviewees (C2, F1, F2, O1, O2, S1, S2, W1, W2) mentioned a great variety of **initiatives** that began to happen as a result of finding the assets in the community. These included:

* a church beginning a community kitchen or an employment program for refugees,
* a community league developing and distributing a "community guide" booklet, including applying for funding and developing a partnership with other community groups,
* a Meals on Wheels project,
* a group working on a collection of Walking Trails,
* a group developing a baby-sitting registry for new parents,
* a group working on community gardens,
* a group beginning to plan a Dream Park,
* a local Heritage Society using the information gathered to access volunteers and begin fundraising to develop a Heritage Museum, and
* a Capacity Study team member fielding two phone calls for information, and was able to provide connections to a bookkeeper and a carpenter who were willing to provide their services either for free or inexpensively, both individuals she had met during the survey process.

> "Some businesses became more aware of the community around it - they knew that knowing their community was in their best interest" (G2).

Five interviewees (C2, G1, G2, M2, W2) mentioned examples **of relationships forming** included those between individual and agencies "that would not have happened otherwise" (C2). This also included the informal contacts made by participants. Another type of relationship which developed was that businesses became involved in the initiative, and some businesses became more aware of the community around it.

Interviewees were then asked **Interview Question 4 (b) "When did these events occur?"** The responses ranged from during the Capacity Study itself to more than eighteen months after the Capacity Study had finished (Appendix O: Timeline).

In addition to the community activity that the interviewees identified, the Community Development Office has compiled its "memories" of activity in the seven communities that may have been related to the Capacity Study. This list is derived from ongoing contact and involvement with these communities. It should be noted here that many of these activities were not known to the community citizens. In addition, many of the things the interviewees remembered were not known to the Community Development Office (these appear in the "Next Step" list, Appendix K, in a distinct font). In this way, both the CDO and the community citizens discovered the entire range of community initiatives sparked by the Capacity Study.

The **CDO** has kept track of the number of requests they received for information regarding the seven community groups. There have been over 150 individual requests for information, as well as countless others that have not been recorded. Requests have been received from New Zealand, Australia, Ireland, Wales, and all over the United States and Canada via e-mail, telephone, and written requests. These requests have often resulted in the Community Development Office acting as a resource.

Interviewees were also asked **Interview Question 6: "How did these activities get started?"**[5] The respondents indicated three general ways the initiatives got started: through **people getting to know one another**, through **the CDO bringing people together**, and through the **Asset Map**.

Nine of the fourteen interviewees (C1, C2, F1, G2, M2, O2, S2, W1, W2) described the way initiatives began in communities was **through people getting to know one another** through meetings and talking to people. Three interviewees (C1, G2, S2) mentioned that this happened at meetings. For example, ideas came out of a group of people getting together (C1). Two interviewees (C2, W1) described immediate connections made while the Capacity Study group was interviewing people.

> "People would say 'I need . . .' and I just interviewed someone who could do that" (W1).

One interviewee mentioned that initiatives began because the **Community Development Office came and got people together**, and from that grew an idea of what to do; he said,

> "it wouldn't have happened without people getting together" (G1).

The third way that initiatives began was through the **Asset Map.**

> "The Asset Map was how it began - when we began to cluster things, ideas for initiatives and activities emerged" (S1).

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[5] This included initiatives they had remembered as well as initiatives related to them by the CDO.

Interviewees were asked **Interview Questionnaire Question 8(a): "What role did the Capacity Study play, if any, in getting these initiatives started?"** Ten of fourteen interviewees replied to this question. Four did not reply. Two interviewees (F1, G1) said that it provided an atmosphere for offshoots and partnerships. Another (S2) stated that the Capacity study caused the initiatives to happen; the study gave impetus for things people wanted to get started. Two more interviewees (C2, W1) mentioned that the Capacity study provided an awareness of similar problems and beliefs between different groups, and introduced those groups. Finally, one interviewee (W2) said that the Capacity Study provided information about contacts, successes, and what had already been done.

There was no response to this question from one interviewee (M1), while two interviewees (G2, O1) did not know how their Capacity Study may have been connected. One interviewee (M2) stated that there was no real connection between the Capacity Study and the activities she was aware of in the community.

KEY RESEARCH QUESTION #3: What determined the sustainability of community building over time?

This key question is answered through **Interview Question 7: "How were these activities kept going if at all?" and Interview Question 8(b): "What role did the Capacity Study play in maintaining these initiatives?"**

Responses to question 7, **How were these activities kept going if at all?**, reflected four main themes for how the activities that occurred after the Capacity Study were "kept going": **commitment, dedication, or perseverance; being a part of an activity; relationships; and passion, honesty, and beliefs.**

Seven interviewees (F2, G2, O1, O2, S1, S2, W1) said **commitment, dedication,** or **perseverance** was an essential element in keeping their activities going. Four interviewees (F2, G2, S1, W1) mentioned the commitment of a group. Three interviewees (G2, O1, O2) spoke of the dedication and perseverance of a particular individual, such as a community league president. Two other interviewees (O1, S2) said that commitments to an outside body were important in sustaining their activities.

> "Incredibly strong commitment - highly valued. Small actions are quite powerful" (F2).

The second common theme that emerged was sustaining the activities through **being a part of an activity.** Three interviewees (F2, G1, S1) referred to the experience of being a part of an activity as a factor that kept the activity going. One interviewee (F2) commented that "small actions are quite powerful [like] the experience of coming together to do the Community Dinners, and experiencing success." Another interviewee (S1) stated that doing something positive for their community added new energy to their day.

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In response to Interview Question 6, previously mentioned, an interviewee (G1) said that participating in a specific project generated "more direction" and "more enthusiasm."

> "Most people have a desire to do something positive for their communities - it adds new energy to your day!" (S1)

The third theme, **relationships,** is another element that interviewees felt was important to keep their community building activities going. Three interviewees (C1, F1, F2) commented that on-going relationships between project partners (e.g. a church and a Gambler's Anonymous group) or between those involved in an activity and those who benefit from it (e.g. people who come to community dinners and those who serve them) were key to sustaining their activities.

A fourth theme mentioned was **passion, honesty, or beliefs.** Two interviewees (G1, C1) mentioned the role of passion, honesty, or beliefs of those involved in sustaining the initiative. The first (C1) mentioned that "all parties involved are honest and share beliefs in people's gifts". In response to another question, the same interviewee said that "this is a passionate process. If passion is removed the process suffers--passion is replaced by problems. When you have passion in your process it creates miracles". The second interviewee (G1) also commented that activity "snowballs if people are receptive, open to new ideas".

> "This is a passionate process. If passion is removed the process suffers--passion is replaced by problems. When you have passion in your process it creates miracles".

One interviewee (G2) indicated that the Community Development Office was key in keeping the project on schedule and providing administrative support. Information provided by the Capacity Study, according to another interviewee (W2), "provided positive information to act on needs of the community". Another interviewee (S2), when asked if they had any other comments, said that it would help to "have realistic goals...it takes several meetings to define what was required, therefore it would help to have someone in charge - once there was focus and structure, the committee seemed to find momentum".

Two interviewees (M1, M2) did not respond to this question.

Interview Question 8(b), "What role did the Capacity Study play in maintaining these initiatives?" drew a very mixed response. Eight out of fourteen interviewees indicated that the Capacity Study played a role in sustaining their initiatives. These eight felt that the Capacity Study helped sustain their initiatives because it **created connections** (C2, S1, S2), **provided resources** (G2, W1, W2), and **inspired individuals** (M2, O1).

> "If you need something, look in the database to find expertise. i.e.: who has ability and willingness, potential" (W1).
> "It doesn't matter that A. and H. have moved away - we still have the resource" (W2).

The **connections** were created by using the surveys to contact people and see if they would like to be involved (S1), getting new members in a community group (S2), and connecting professionals on a "personal level" (C2). Comments which indicated that the Capacity Study **provided resources** included using the database to find expertise (W1), using the information gathered during the Capacity Study as a "continued resource" (W2), and the fact that the Capacity Study "identified resources and needs that were used as part of the planning of the project" (G2). Finally, individuals that played a role in maintaining the community's initiative (M2, O1) were **inspired** by workshops given by the Community Development office during the Capacity Study process. One interviewee (M2) commented that "the training becomes internalized, and you continue to use it", while the other saw a workshop as "inspirational for projects like the resource booklet and the history project".

Three interviewees (F1, F2, G1) did not link the Capacity Study to the maintenance of subsequent initiatives. One respondent (C1) felt the Capacity Study did not play a role at all, while another stated that they did not realize the Capacity Study played a role (F2). The other interviewee (F2) also questioned the role of the Capacity Study in maintaining the initiative; "It could have [helped maintain activity], but there are problems with the model...It's too short-term... I'd hate to think 'Capacity Study people' would be accused of just parachuting into communities."

Three other interviewees (G1, M1, O2) had no response to this question.

KEY RESEARCH QUESTION #4: Was there a role for a service provider and what was the role? Was there a community builder and what was the role?

To determine whether there was a role for a service provider or community builder, and specifically what that role was, individuals were asked to respond to **Interview Question 9(a): "Who played strong roles in your community building activities?"**, and **Interview Question 9(b): "Please describe what they did."**

Some respondents had comments regarding the mix of people who played these essential roles. Two respondents (F1, O1) felt that there were not enough people involved. Another respondent commented that "the Capacity Study suffered from hidden agendas - people came to the table for the wrong reasons" (C2).

All of the interviewees identified key individuals or groups from their community as playing strong roles. Important attributes or actions by **individuals** that were mentioned by more than one interviewee were:
- being **enthusiastic** and **positive** (C1, F2, S1, W1)
- having many community **contacts** (G2, S1, W1)- being the "local link to the community" (G2)
- having **historical knowledge** of the community (G2, S1)

Other important qualities of individuals included perseverance, humour, dedication, the ability to take risks, knocking down barriers for outsiders, and being the back bone or constant in the group.

Fourteen of fourteen interviewees said that **community members and community groups** played a strong role in community building. According to the interviewees, they did surveying, held meetings with municipal government and interested community members, did the "leg work", provided moral support, and acted as a resource. Three interviewees (G2, M2, O2) mentioned explicitly the community group's role in providing **volunteers**.

Nine interviewees (C1, C2, F1, G1, G2, M1, O1, O2, W1) identified the **Community Development Office** as playing a strong role in their community-building activities. The role the Community Development Office played in the community building generally fell into two categories: **administrative/organizational support** and **energy**. Five interviewees (F1, G1, G2, M1, O2) described the Community Development Office's role in providing **administrative/organizational support**. Comments included: "the Office was the initiator, organized and led meetings, documented, did the leg work"; "the office provided expertise and support"; "CD Office did all the liaison, made contacts, wrote the report". Three interviewees (C2, G2, O2) commented on the **energy** and enthusiasm individuals from the Community Development Office brought to the activities. One individual said, "S. brought passion and focus. She was the driving force." Another stated, "S. and A. brought lots of energy."

> "The office was the initiator, organized and led meetings, documented, did the leg work"
> (G2).

Eight of fourteen interviewees commented on the role of a community builder. Six interviewees found the community builder to be essential. One community person said that "you need a catalyst - one person to start and put their heart into it" (F2). Three interviewees (C2, F1, M1) identified the Community Development Office as the "driving force" for their activities; one interviewee (G2) said, "I don't know if the Guide[6] would've

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[6] The Glenwood Guide was a local resource/business directory completed by a group in the Glenwood community in West Edmonton.

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been completed without the CD Office - their continuing stimulus and support." Another interviewee (G1) remarked that "it was nice to know that the Community Development Office was there to carry it on and do the work, because with people who work, you don't like asking for their after work time."

Two interviewees stated that they felt the way the Community Development Office left the community building process to be negative. One interviewee's (F1) response to question 8b (on the role of the Capacity Study) also applies to the role of the community-builder: "There are problems with the model... You can serve as a catalyst and then walk away. It's too short-term."

> "S. shouldn't have left the process. When she left people started to fight. Whoever starts the process has to be there all the way through. Had the passion remained, it would've been more productive" (C2).

KEY RESEARCH QUESTION #5: Did any elements of the Community Building require funding, and if so when was it received and who was the funder?

This question was answered by **Interview Question #10: "Did any of the activities or initiatives that we've talked about so far require funding? If so, when was it received and who was the funder?"**[7]

Out of fourteen people interviewed, eleven (C1, C2, F1, G1, G2, M2, O1, O2, S1, S2, W2) indicated that certain initiatives and activities that they were involved with required funding. Nine of these respondents (F1, G1, G2, M2, O1, O2, S1, S2, W2) indicated that funding was received for specific projects **after** the capacity study was completed. Two indicated that funding was received for data entry during their capacity study (C1, C2).

Nine interviewees identified various levels of **government** as their funders. Six respondents (G1, G2, O1, O2, S1, S2) identified the Community Animation Program[8] as the funder for their activities after the Capacity Study. These six interviewees represented three community groups; one in PEI (Stratford), two in Edmonton, Alberta (Oliver and Glenwood). Another interviewee (M2) said her activities after the Capacity Study were funded by two provincial government bodies - the Office of the Commissioner for Children's Services and Alberta Advanced Education and Career Development. Two interviewees (C1, C2) indicated their group also received part of their funding from the

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[7] This question referred to funding only for activities other than the Capacity Studies themselves, primarily those which came about as a result of the Capacity Study.

[8] The Community Animation Program (CAP) is a joint Health and Environment Canada (both federal departments) funding program. It "assists communities to build their capacity to take action on health/ environment issues" and enables them to "access the expertise and resources they need to accomplish their own goals."

Commissioner for Children's Services. One respondent (W2) said that one of the activities in his community was funded by the Town of Whitecourt's Community Services department.

Three interviewees (C2, F1, W2) identified **non-governmental sources** of funding. One interviewee (C2) indicated that her group received funding from Bent Arrow and Acadia House (both non-profit agencies). "Private resources" were used as funds for one interviewee's activities (W2). Another (F1) said that in-kind support was provided by a church.

The CD also attempted to determine the impact of funding on the community-building activities that received it. **Interview Question #11** asked: **"How did the funding or lack of funding make a difference, if any? (i.e. a help or a hindrance)."**

Nine interviewees (C1, G1, G2, M2, O1, O2, S1, S2, W2) said that the funding was helpful or essential to the activity or initiative. Three interviewees said their project "would not have been possible" (O2) or "would not have happened" (O1, G1) without funding. In one case (C1), funding was essential for supplies and materials during the Capacity Study. In four cases (G1, G2, O1, O2) funding was essential for the purchase of supplies, materials, and for paying printing costs for a project emerging from the Capacity Study. Four interviewees stated their group used money to hire someone for data entry (C1, C2) and "to do the leg work" (S1, S2) during the Capacity Study. One interviewee, when asked for other comments, said the funding was useful since it was "good to hire an anchor person- everyone is terribly busy with no time to do the leg work and the background work" (S1).

One interviewee (C2) expressed strong negative feelings regarding funding received during the Capacity Study. She felt that her group "went kooky" after they decided to seek funding for someone to enter data from the Capacity Study:

> The biggest mistake [we made] was trying to get money. Everyone's attitude changed. It changed V.'s role, attitude, and responsibility...we paid more attention to who controls the dollars. The reason to get dollars was right, but problem was getting it... the money should've been part of the original plan. Either do it for money and have it up front or don't bother. It shouldn't come half-way through. (C2)

OTHER COMMENTS:

As with any conversation, there was a great variety of advice and insights from the interviewees that really do not fit into the framework for discussion developed here. The following is a selection of quotes from interviewees:

About the **political environment**:
- "I don't think [the capacity study] went very well, mostly because of the stakeholders involved. I found myself as a 'humorous observer.' Half the people wanted to do capacity building and half wanted to 'pee on territory.' It wasn't a community-building experience as much as older players saying, 'this has already been done' versus newer people saying, 'why can't we do it?' ". (F1)
- "The capacity study confirmed my prejudices and beliefs. There are groups not willing to look at different paradigms. Some stakeholders have too much to lose. They have always done things the same way." (F1)
- "We were driven by outside forces we tried hard to ignore." (C2)
- "You have to understand where I came from -- we just lost an acute care facility. . . . My biggest concern was that the health care system was looking for community to pick up the slack for programs that were being cut. So I had quite a chip on my shoulder -- I was concerned that it wasn't a 'shift' to community, but a dump on the community." (M1)

About the asset-based community development **philosophy**:
- "One of the problems was there was not agreement over philosophy. Service providers working from needs assessment framework versus capacity building. It would have required a 'conversion experience' ". (F1)
- "We are actively promoting this philosophy and way of doing things as much as possible here because we see it as providing hope in times of dwindling resources and opportunities. The more the community can take on the better -- they can do it so much better than the service." (S1)

About the importance of **language**:
- "There are values behind the words we use, and when we talk about concepts for Aboriginal people, they see things differently. . . Words become very important. When I think back now, there needs to be a lot more attention paid to the words that are used--it's not just the words, it's the values behind them." (C2)
- Language must be addressed. A lot of people missed this. For example, the questions [on the questionnaire] were meaningless for high school students." (C2)
- "Writing the report was a huge struggle because it wasn't the same kind of information as you would find in a needs survey (i.e.: statistics and gaps). So we struggled to put it into meaningful language." (C2)
- "I found the data and statistics [in the report] a little bit confusing for the average person. Sometimes the language was a bit too technical. But I realize these kinds of

reports need some form of accreditation--you need to find some kind of mix between plain language and technical." (C2)

About **business involvement**:
* "A community is made up of a bunch of different kinds of players--businesses often left out of equation. By including them it allows for better dialogue." (F2)
* "We found out that the assumption that businesses didn't want to contribute was wrong. They did but we had cut them out of their traditional role as givers. There wasn't an open door for them." (C2)

VI. DISCUSSION

The following discussion is an attempt to find answers to the five Key Research Questions through conversations with community citizens. The researchers discussed the extensive interview results within the boundaries of these questions, which seemed limiting at times, but it was useful in organizing the vast amount of information. The volume of information prevented the researchers from analyzing or including it all. While there are no absolute conclusions reached, this reflection provides rich, practical, information to answer: (1) "How can this information make future Community Building more successful?" and (2) "What does this mean for the practice of Community Building by the CDO?" All the information will be shared with the participants for their further reflection and to assist them in continuing the Community Building.

> "I would encourage other communities, especially young growing communities, [to try this] if you get to a stagnant point and you need some spice, throw everything in the pot, stir it up, and you get new things started" (W2).

KEY RESEARCH QUESTION #1: How and where did the initiative start in the community?

There was a range of responses to this question, including being approached by the CDO (five interviewees), and meetings organized by the CDO (two interviewees) or another organization (three interviewees). The theme of **people coming together** is apparent; people beginning to talk to each other was what got the Community Building going. The CDO makes a distinction between quality of contact between community members; often meetings create a situation in which the boundaries and politics make it impossible for people to truly get to know each other. In contrast, the type of gathering which was successful in getting an initiative started in these cases was one which encouraged an **atmosphere for sharing, learning, and discovery of each other's gifts, ideas, and interests, and which ultimately led to relationships developing between citizens.** One interviewee expressed this distinction: the initial meeting "was not positive for the church. [The church] had not been exposed to the bureaucracy of food security - the language was a turn-off. The competition between food agencies was noted, and they decided to

do something out of the church" (F2). The contrasting experience was that of an "inclusive process, supportive of anyone coming to the table. . . . they wanted to get information in a different way and from different people. People who weren't service providers" (C2).

The theme of a **"new way"** of doing things also emerges strongly. Interviewees from five of the seven communities said that what appealed to them, was the "new way" of doing things, which was presented by the CDO through the Community Capacity Building and Asset Mapping© Model. This was expressed as "finding out what each person has to offer" (C1), "look at assets and strengths" (O1), "assets and gifts versus need" (S1), "there was this new concept they were going to try" (G1), and "wanted to get information in a different way and from different people" (C2). The interviewees seemed to be saying that not only were people getting together, they were getting together to look at their communities in a different, more positive, way that focused on the "assets and strengths" rather than on the needs.

A key element in community development must be a focus on getting people together to talk and nurture an atmosphere for sharing and learning about one another and the community. Traditional style meetings and focus groups, which include primarily service providers and use intimidating and exclusive language, do not nurture this atmosphere.

KEY RESEARCH QUESTION #2: What were the common elements used to find the assets and mobilize them?

The information gathered from community citizens affirmed the CDO's understanding of the usefulness of the Six Steps to Capacity Success© and the sub-steps as a vehicle for *finding* the assets and beginning the conversations that must happen between community citizens before building can take place. Interviewees said that each of the sub-steps served a purpose. While no sub-step was considered useful by all of the interviewees, comments reflected that all of the sub-steps were important to some of the various communities. Table 1 (p. 18) shows this clearly, and these figures are supported by the comments of the interviewees. Those sub-steps that involved talking to and meeting community citizens and groups were identified by more interviewees as being useful: developing questionnaires (ten of fourteen), listing businesses in the community (eleven of fourteen), engaging in ongoing communication with the community (including paper description, the written report, and sending summaries to respondents, all of which were said to be useful by ten of fourteen interviewees), and developing an Asset Map (nine of fourteen). **This reinforces the findings of Key Research Question #1; the relationships and sharing with other community members are key components of community building.**

The remaining sub-steps were useful in various ways to different groups, as shown in the comments for each sub-step in the results for Key Research Question #2 (p. 10 - 18). Interviewees comments reveal that a Step that may have been very important to one community group may not have been useful to another. The usefulness of a particular

sub-step may have been felt more keenly by other participants in the Community Building who were not interviewed during this research (see Limitations, p. 28). A broader selection of community citizens would have helped to balance this numerical representation of what was useful or not useful. Very few sub-steps were identified explicitly as being not useful, and no step was identified as being not useful more than once, which may show that "no responses" indicate that interviewees did not do, or did not remember doing, that step.

In *mobilizing* the communities' assets, the common element that all interviewees identified was that a relationship always preceded their community action or initiative. Interviewees from every community remarked that initiatives began through people getting to know one another: through a "relationship with Police and Public Health" (C2), "stimulated by dialogue and conversation" (F1), "It wouldn't have happened without people getting together" (G1), "we approached them or they approached us (for partnerships)" (M2), "H. asked for help" (O1), "getting people together who are interested in similar things is the best part" (S2), "people would say 'I need. . .' and I just interviewed someone who could do that" (W1). That is, the discovery of the community's assets came through talking, the mobilization of the community's assets came from the relationships formed as a result of the talking. Once again, **the common thread of people getting together and developing relationships, as in Key Research Question #1, emerges as communities mobilize their assets.**

One of the vehicles for mobilizing community strengths that interviewees identified as useful was the **Asset Map**. The Asset Map served as an "eye-opener" to the strengths of the community. It resulted in a broader picture of what the community had to offer; in one community, businesses were included in the community activity when they had not been before.

In almost all communities, there were initiatives resulting from the connections made during the Capacity Study that not everyone knew. This reflection shows that no one group or person ever has a complete understanding of all the formal, informal, personal, or even large and public initiatives happening in the community, as a result (direct or indirect) of the Capacity Study.

The Steps to Capacity Success© were identified by these fourteen interviewees as a way to successfully Community Build when the community decides which Steps to pursue in their Community Building. This is clearly shown by the interviewees' comments about the usefulness of a Step; one interviewee may not have remarked on a Step, while another from the same community found it to be extremely useful. The most telling results are the "not useful" totals: six of twenty-eight steps were identified as not useful by only one of the fourteen interviewees each. It may not be the only way, but the successful outcomes and feedback from the interviewees shows that it is a way to achieve the results of finding and mobilizing a community's assets. The Steps to Capacity Success© formed the foundation for these successful Community Building examples. The Model was not used

as a recipe to be followed exactly, but as a guide that each community can use within its own context.

KEY RESEARCH QUESTION #3: What determined the sustainability of the community building over time (1-3 years)?

The reason the CDO asked this question was to try to determine what the CDO and the respondents saw as key to "keeping things rolling" and "happening" in Community Building. Was it the people (individuals or groups), money, or other factors?

The interviewees identified five gifts as essential in maintaining the Community Building in their communities (see Results, p. 21-22):
- commitment, dedication, or perseverance
- being a part of an activity
- passion, honesty, and beliefs ·
- relationships
- knowledge

None of these gifts/attributes or factors are surprising to community builders; *but* it is **WHEN** these qualities emerged that is interesting, and which will be discussed later in this section.

The results from Key Research Question #3 show that seven of fourteen interviewees (F2, G2, O1, O2, S1, S2, W1) mentioned commitment, dedication, and perseverance - the need for a "steady, constant presence," as one interviewee put it - as one way "activities were kept going." One interviewee commented that the reason she got involved with producing a resource directory for the Oliver community was because the original planning group was down to one very dedicated member who was now asking for help.

The results also show that this commitment was most likely increased when community members participated in a concrete project or activity; three interviewees commented on this (F2, S1, G1). As well, two interviewees (G1, C1) said passion, honesty, or mutual beliefs were highly valued.

Interviewees identified specific knowledge, like contacts in the community or knowledge of history, as important. The responses seem to suggest that specific knowledge was not as strongly identified as enthusiasm, values, relationships, commitment, and action. Perhaps this suggests that knowledge/skills and talent are not ultimately as crucial to community building as the more intangible qualities that come from the "heart." As one interviewee emphatically stated, "this is a passionate process... When you have passion in your process, it creates miracles" (C2).

When asked more explicitly what impact the Capacity Study itself had on sustainability, interviewees mentioned the connections they made that formed the basis for relationships,

the information and resources they gathered, and the inspiration to accomplish some action. **The Capacity Study, then, provides a way to lay the foundation for achieving sustainable Community Building.** It nurtures the formation of relationships between community people; it facilitates the sharing of information and gifts between community people; it inspires community people to develop relationships with other citizens toward building their own community.

Many of these factors/attributes that sustain Community Building are commonly cited by others, but this reflection reveals something new. **The Steps to Capacity Success© and the sub-steps nurture the emergence and development of these qualities.** In other words, these gifts and capacities could not be seen at the outset of the Capacity Study, but over the time of the process they appeared as the connections and relationships developed. The Steps to Capacity Success© seem to be an effective way to bring out the incredible gifts of community people - specifically commitment, dedication, perseverance, passion, honesty, mutual beliefs, and knowledge.

The Steps to Capacity Success© encourage, nurture, and develop commitment and passion and other qualities in people; its seems they are relationship-creating, and ultimately increase participation by new people in local action by the community. It is difficult to have a friendship or relationship until each person shares his or her gifts, but the sharing of people's gifts is uncomfortable without first having trust. The results reinforce the importance of relationships in discovering communities' gifts and assets, mobilizing those resources in community initiatives, and ensuring the sustainability of those initiatives.

In a final note about sustainability, it is very revealing that NONE of the interviewees said that either funding or money were necessary for sustainability.

KEY RESEARCH QUESTION #4: Was there a role for a service provider and what was the role? Was there a role for a community builder and what was the role?

The categories of service provider[9] and Community Builder have been constructed for the purposes of the research. In the CDO's work, it has struggled with the label of service provider. The CDO has felt that its relationships with communities are of a different quality than those that are found through the rigid mandates and roles of "traditional service." The CDO hoped that these reflections would reveal how the community people saw their role(s) and the role(s) of the CDO - as a provider, a consumer, and a friend - and whether they saw their relationship with the CDO as short term, long term, or transient. Answers to these would assist the CDO in further understanding their practice.

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[9] In "Building on Capacities - Terminology," the CDO defines a service provider as "individuals who provide professional expertise to others."

Interviewees identified the personal attributes of those involved as being important to community building: enthusiasm, being positive, perseverance, humour, dedication, the ability to take risks, community contacts, and historical knowledge (see Results, p. 23-24). Since these gifts and attributes were identified in both community people and members of CDO, there seemed to be no clear separation between the CDO and others as service providers or community builders.

All fourteen interviewees identified either community groups or citizens as having played strong roles in Community Building. These seven communities are examples of communities that discovered the people and resources to accomplish their Community Building. Paid community builders do add gifts and strengths to the process of the discovery and mobilization of these; they can become part of the relationship-building that sustains Community Building.

In order to look at better practice, the CDO more closely reviewed responses to Key Research Question #4 (Was there a role for a service provider and what was the role? Was there a role for a community builder and what was the role?) and Key Research Question #1 (How and where did the initiative start in the community?) and #3 (What determined the sustainability of the Community Building over time?). It seems the CDO has had two major roles in the process of the Capacity Study - Steps to Capacity Success©: as a **spark/enthusiast** and as a **resource**.

The results from Key Research Question #1 confirm the CDO's learning over the past three years - it can play a role as a **spark** by bringing people together in an atmosphere of sharing, learning, and discovery AND as **resource** by introducing the idea of a **"new way."** Nine of the fourteen interviewees identified the CDO as having played a strong role.

"The Spark" and enthusiast:
The CDO was a spark and an enthusiast for all seven communities, either because the CDO was in attendance at a meeting of a group, they wished to learn by working with a community, or they were asked to assist in making things happen. The level of success of being a spark, or the amount of time it took for actions to occur after the Capacity Study was completed, may be a function of the context of the Community Building group.

Two communities began looking at strengths and assets as a result of meetings organized by a government agency or institution. In both of these cases (Food Security and Children's Services) the CDO played an indirect role, which was not explicitly mentioned by the interviewees; a representative of the CDO was a part of both of those meetings and was identified as a "spark" from within those groups. When one looks at the comments of those involved in these two groups, they are less positive than others. Many of their negative comments seem to stem from the bureaucratic hurdles that stood in the way of their Community Building efforts. One interviewee from the Food Security group said, "one of the problems was there was not agreement over philosophy. Service providers

working from needs assessment framework versus capacity building. It would have required a 'conversion experience' "[10] (F1). Another interviewee from the Children's Services Study said, "there were ownership issues through the whole process...[people thought] 'my needs are more important than your needs'...nobody knew what the steering committee was going to do next - [there was] a sense of being deceived" (C2).

These groups were not looking for a spark and in both situations there was no kindling - the environment for the discovery of gifts and capacities, and development of relationships - for the spark to ignite. This suggests that Community Builders acting from "within" the system will face considerable challenges. A spark must have kindling, and often bureaucracies have very little "relationship-building kindling" available.

In response to Interview Question #1, interviewees from four community groups (G1, M1, O2, W1, W2) indicated that their Community Building started when someone from the CDO contacted them with the idea - the spark. Before this, none of these groups had expressed interest to the CDO. All four of these communities have seen a considerable time lag between the completion of the Capacity Study and having any community action resulting. Many factors could account for this, such as the mix of personalities or other unique conditions of the community, but this seems to suggest that when the CDO initiates Community Building there may be a time lag before the community "catches fire"[11]. This might be the "readiness factor" - the amount of kindling (the environment for the discovery of gifts and capacities and relationships) that has to be gathered for the spark to create fire.

In contrast to the previous six groups, the seventh group (S1) asked for assistance from the CDO to help get things going - to spark some enthusiasm within a group that was keen but that seemed to be going nowhere. In this group actions, or "fires," began even as the Capacity Study was going on. This group had the "kindling," they just needed a spark.

The answers to Key Research Question #4 also show that the CDO has played an often undervalued role: that of enthusiast. The energy and optimism provided by the CDO were highly valued by several of the interviewees (C2, G2, O2). Energy and enthusiasm were also among the main personal attributes that interviewees felt were important in Community Building activities.

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[10] Although the Food Security Capacity Study did result in an activity (i.e. a community dinner hosted by a church), one interviewee (F2) indicated that it started in spite of many of the things happening as part of the Capacity Study: "[our church] went to the meeting at the Edmonton General Hospital. It wasn't positive; we were never exposed to the bureaucracy of Food Security. The competition between agencies was noted, therefore we decided to do something out of the church."

[11] As further evidence of this, both the Whitecourt group and the Millhurst group have recently contacted the CDO to discuss once again trying to animate their communities to act on the results of their Capacity Studies.

Resource:
Five interviewees (F1, G1, G2, M1, O2) described the CDO's role of providing administrative and organizational support as important. One interviewee said, "it was nice to know that the Community Development Office was there to carry it on and do the work, because with people who work, you don't like asking for their after work time" (G1). The continuity and ability to provide support doing the tedious administrative tasks of Community Building may be one way in which paid service providers can act as a resource to communities.

The CDO also acted as a resource to the community groups by introducing a "new way," which underpins the effectiveness of the CDO's work with these community groups. This includes the quality and openness of the CDO's relationship with the community group. This is demonstrated by the interviewee's references to personal characteristics of CDO members: "S. brought passion and focus," "S. and A. brought lots of energy." From the experience of the CDO, the boundaries around roles and the difference in perceived status of paid and volunteer people each have an impact on the effectiveness of groups. The interviewees in this research did not identify clear roles, distance, or separation between the CDO and the community group, which suggests that one of the positive outcomes of the Asset-focused approach to community building is that it encourages the development of relationships between everyone; service providers and community people can be equal contributors to community building, each with gifts and resources to contribute. The Model provides a way through which the boundaries between service providers and community disappear, and relationships that build and last over time are created. This shared learning in action is clearly a positive outcome of this Community Capacity Building and Asset Mapping© Model.

KEY RESEARCH QUESTION #5: Did any elements of the Community Building require funding, and if so when was it received and who was the funder?

This question was intended to refer specifically to money support rather than any in-kind support during the Capacity Study or for activities after. Four of the five groups that received funding received it after the Capacity Study, while one received it during the Capacity Study. Eight of the nine interviewees who responded to this question said that funding was definitely positive, and in most cases essential. These results may be used to speculate on the enabling or disabling potential of funding.

The first type of funding received by all of the groups was indirect funding in the form of expertise, administrative support, or participation from the CDO.[12] As this support was received by all the communities, it is difficult to draw any conclusions about its impact.

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[12] This was less true of the Stratford, P.E.I., community. It received administrative and staff support from the Queen's Region Health Unit.

Comments from interviewees, however, would suggest that this support is valuable in accomplishing tasks for which volunteers would not have the time (see Discussion for Key Research Question #4 regarding the role of the CDO).

The second type of funding, which the communities of Stratford and Whitecourt received, was funding for the purpose of hiring a support person for Community Building. Little may be learned from this information, except that it suggests that a paid resource can be positive in Community Building.

The third type was funding received for supporting community action *resulting* from Capacity Studies. This was the case for the communities of Glenwood, Oliver, and Stratford, from which every interviewee found this type of funding to be enabling. The interviewees from the Oliver community said, "the Oliver Resource Booklet would not have been possible without the dollars," and "the Project would not have happened otherwise."

The only interviewee who referred to funding as a disabler was one in which the community group sought funding during the Capacity Study activity. This example differed from the others because the funding was used to pay a person who previously was a volunteer member of the group, which created problems in the group dynamics. The funding, according to one interviewee, seemed to result in the group going "kooky," and paying "more attention to who controls the dollars" than to the Capacity Study.

A key learning from the discussions with community people has been that **funding can quite clearly be an enabler to Community Building when the support is received through one of the partners *and* when it is to support activity *resulting* from the Steps to Capacity Success©.** It may be possible to say, upon reflection, that funding can be a disabler when it replaces the natural relationships built from the discovery of a community's gifts.

V. LIMITATIONS

1. Challenges with "Leading" and clarity in Interview Question #3:

This question presented some difficulties during the interview. In many instances the interviewee was asked to comment on the usefulness of a step with which the interviewer knew he or she had not been involved. The interviewer attempted not to make any assumptions about the interviewee's memories or experiences, but this was sometimes uncomfortable for both the interviewer and the respondent. It would have been more effective to be forthcoming about this known information during this portion of the interview.

Passage of time was a challenge when discussing the steps and sub-steps as well. In many cases, a great deal of time had passed since conducting the Capacity Study, and the interviewees had difficulty recalling the steps clearly.

Another concern with the discussion of the sub-steps was with the question regarding the usefulness of each sub-step, and the definition of "useful." The interviewees should have been asked to clarify whether they meant that the sub-step was useful to do, or useful to see. (i.e. was it useful to create the asset map or see the finished product?)

2. Challenges with the Questionnaire in general:

Some Interview Questions were confusing to the respondents. Specifically, Interview Questions #7 ("How were these activities kept going, if at all?") and #8(b) ("What role did the Capacity Study play in maintaining these initiatives?") Some interviewees did not understand Interview Question #7, even when prompted with the examples on the questionnaire. The interviewer had to clarify with further examples. Interview Question 8(b) was confusing to some respondents as they did not see the difference between 8(a): "What role did the Capacity Study play in getting community building activities started" and 8(b): "What role did the Capacity Study play in maintaining the community building activities?"

Technical difficulties with the audio recording equipment were experienced in three of the fourteen interviews, which may have affected the quality of the final entry of information into databases.

3. Challenges with Data compilation and analysis:

The researchers found it challenging to analyze the data due to its conversational nature. This type of qualitative analysis may have been more effective if the researchers had more experience with qualitative research. The method chosen to analyze the data (i.e. Pulling out key phrases and then grouping by theme) may have resulted in a loss of richness in the data. As well, this type of analysis required personal interpretation; different researchers may have come up with different themes.

4. Challenges with time and with number of interviews

Had there been more time to complete the interviews, more than two participants would have been interviewed from each group in a greater effort to get different perspectives. The initial fourteen participants were all asked, "who else in your community should we talk to." Time constraints prevented further interviews being conducted with this list of potential contacts.

VII. CONCLUSIONS AND FURTHER QUESTIONS

The CDO conducted this reflection for two reasons: to increase the level of success of other Community Capacity Building and Asset Mapping© initiatives and to improve the practice of the CDO.

The results of this reflection on some of the Community Building, through the Steps to Capacity Success©, activities of the seven communities and the CDO over the past three years are not definitive. The discussion shows some key learnings about the practice of Community Building, and about process factors that may encourage Community Building. This reflection provided a time for the CDO to chat and learn more from our community friends. In summary, the key outcomes of this reflection were:

- Community Capacity Building and Asset Mapping works. In each of the seven communities, Community Capacity Building and Asset Mapping nurtured an atmosphere of discovery and sharing from which community driven initiatives emerged. The conversations with community people affirmed the CDO's belief that this vehicle for Community Building is based on a sound understanding of Community, and allayed the CDO's fear that the process created false expectations among community citizens and groups about the potential outcomes of Community Building.

- The Steps to Capacity Success are a flexible resource to others for Community Building. The Steps to Capacity Success facilitate the building of relationships. Each community is different, and as such will make more or less use of each of the six Steps and sub-steps, or find various uses for each sub-step. The most effective use of the Steps to Capacity Success in Community Building is as a resource for community builders to begin to find their own path.

- A key learning in this reflection has been a keener awareness and understanding of the impact of the CDO's involvement in, and withdrawal from, Community Building. Always conscious of creating or perpetuating dependencies, the CDO may withdraw inappropriately from Community Building activities. This has often been because members of the CDO often feel they are not needed or that they may begin to create a dependency should they stay longer. This reflection with community groups has shed more understanding on how to balance this involvement, and clarified the long term impact and importance of nurturing this balance.

  The CDO has always been part of the community building activity. The nature and personality of the CDO and its members are such that relationships form on the same level as they do with people involved in the initiatives, and so have the same impact as when a community member moves or withdraws. The CDO learned that staying

involved longer is not disabling, but forms long-lasting relationships. The CDO is effective often because members of the CDO relate to community members as equals. They become personally involved, sharing enthusiasm and energy. By deliberately "stepping over" the boundaries between professionals and citizens, the CDO helps build community from the "inside."

In conclusion, this reflection has presented some further questions regarding Community Building and the practice of community development:

- What would others who were part of these seven communities say?

- What is the personal impact of the asset focus in Community Building on the citizens who chose to engage in relationship building and the discovery and mobilization of the community's gifts and assets?

- What impact does the acquisition or attempt to acquire funding have on the community group or its community building activity? Or, more precisely, is the positive impact of funding dependent upon the stage of community building at which the community acquires funding?

- The CDO would like to further explore the impacts of the practice of paid community builders on the community. How does this differ from unpaid/insider community people building from within?

- Would narrative research have provided more insight? In other words, rather than compare the parts of the various communities out of context, compare the communities on the basis of a community story in its context. This type of research may elicit a different picture of the community, and allow for a greater understanding of cause and effect relationships in Community Building.

- What is the learning relationship between community and community development practitioners?

While this reflection may seem to have produced more questions than answers, it has also served to clarify and affirm the challenges and learning in the position of professional practitioner of community development. The constant questioning involved in this reflection enhanced the CDO's understanding of what works and what does not work in community building practice, and of what questions should be asked in the future. The sharing of this research through publishing some of the results and making this written account available to others can also become a building block for improving others' practice of community building.

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IX. APPENDICES

A: Who Are We?
B: Words, Words, Words
C: Community Capacity Building and Asset Mapping© Model
D: Community Development Web Page
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Appendix A:

Who Are We?

COMMUNITY DEVELOPMENT

Capital Health - Community Care & Public Health

c/o Jasper Place High School #681 8950 - 163 Street

Edmonton, Alberta   T5R 2P2   CANADA

Phone: (403) 484-9045   Fax: (403) 484-9099

E-mail: cdoffice@cha.ab.ca   WWW Site: http://www.cha.ab.ca/commdev

September, 1997

Who Are We?

We are a small dynamic arm of the Capital Health Authority in Edmonton, Alberta located in Jasper Place High School in Edmonton. Our numbers are small; there are three of us who are here most of the time - Johanna, Angie, and Susan - but we also have a great mix of community contractors and volunteers who "hang their hats" here depending on what is happening around our office - Graham, Mitch, Lynn, Jenny, and others.

Our group practices the philosophy of "Community Capacity Building"; we believe that each citizen, community, organization, and business has gifts to share with others. "Community Capacity Building" is a way for community citizens to support each other in the discovery, and mobilization of these gifts. We have a reference list of publications and references that has provided insights and a sound base for what we do (this includes some of Kretzmann's and McKnight's work).

Our small office has become a resource and research connector supporting the development and sharing of new community and neighbourhood discoveries and existing community resources. Our fun and exciting work with Glenwood, an Edmonton neighbourhood, resulted in the development of a model, or path, for Community Capacity Building & Asset Mapping© (developed when we were with Caritas).

Our experiences in Community Capacity Building & Asset Mapping© - which is made up of the Steps to Capacity Success©* - have broadened our horizons and our understanding of people and communities. We have been delighted to work with other neighbourhood and community groups as they use Community Capacity Building & Asset Mapping© in a variety of settings and with a variety of questions. The general goals of Community Capacity Building & Asset Mapping© are to:
- discover the assets/capacities that a community and its citizens are willing to share to support their community
- design an asset map that graphically shows the supports and their connections
- connect community resources for the development of community supports
- nurture relationships that will result in community animation and action.

We have worked closely as they have used the Steps to Capacity Success© in their own way. Through this work we have developed a variety of partnerships and unusual linkages. We have seen many things happening in the communities and neighbourhoods as they move forward to bring in the gifts and resources they have discovered together that enrich both the economic and social life of their community.

We have developed a Community Capacity Building & Asset Mapping© Workshop which interactively guides the participants in developing their "asset focused" thinking and determining where the "no longer strangers" idea fits in their own life context. The workshop assists participants in planning their own Steps to Capacity Success© with their neighbourhood/community.

Workshops that we facilitate include:
- Community Capacity Building & Asset Mapping© (Day 1 - The Thinking & Day 2 - The Building)
- Planning Alternative Tomorrows with Hope (P.A.T.H.) a graphic visioning exercise
- Proposal Writing - Just Do It
- "Spark" Workshop - to develop facilitation ability

* *Please note:*   *We now use the term "Steps to Capacity Success©"; various communities told us "Capacity Study" was not a good term.*

We are now developing two new Community Building Workshops:
- "Kids are Neat"
- "Being Involved and Liking It"-Business and Community Spearheading Change

We have had strong involvements with many citizens and groups including:

- Abbotsfield/Rundle Heights Community
- Acadia House
- Alberta Heritage Foundation for Medical Research - Swift Efficient Application of Research in Community Health (S.E.A.R.C.H.)
- Aspen Health Authority - Alberta
- City of Edmonton - Planning, Community Services
- Community Building Resources
- Community Groups - (Queen Alexandra Community Knowledge and Skills Sharing (QACKSS), Parkallen, and Mapping Inglewood Assets (MIA)
- Community Leagues - Glenwood, Millhurst, and Oliver
- "Discovering The SPICE of Whitecourt" project
- Edmonton Womens Health Network

- Family Support Network
- First Baptist Church, Edmonton
- Grey Nuns - Womens Wellness Initiative
- H.E. Beriault Junior High School
- Jasper Place High School
- Jasper Place Gateway Foundation
- Muttart Foundation
- Oliver Redevelopment Planning
- Pakistan Canada Association - Youth
- Prime Time for Women
- Queens Health Region, P.E.I.
- Stratford, P.E.I.
- T.D. Baker School
- Toxics Watch Society
- WEBA - West Edmonton Business Association
- West Edmonton Inter-agency Group
- Westlawn Junior High School

We are resourced by communities, citizens, businesses, associations and health care for:

- Community Capacity Building & Asset Mapping©
- community development education and training
- developing internal and external community communication links
- proposal writing

- developing partnerships and linkages
- working with service providers toward their understanding of community building community development, and asset based community development
- practical community centred research
- searching for project based funding & support

After three years of Community Capacity Building and Asset Mapping© with the Steps to Capacity Success©, we spent time in the summer of 1997 reflecting with our community friends to see what has been happening. From this reflection, we learned more about the importance of relationships in creating and sustaining community-centred actions. This reflection affirmed that Community Capacity Building & Asset Mapping © creates an environment for relationship building and opens the door to a new positive way for communities to build a community they want. The results of this reflection on community building are collected in a paper entitled "Listen and Learn...The Answers are with Communities", which we presented at the Annual Community Development Society (CDS) International Conference in Athens, Georgia, USA in July 1997. This paper will be completed by September and a summary will be included on our web site.

We have a tri-annual newsletter (October, January and May) that helps to keep our friends current with what we are doing. If you would like to be on our mailing list please let us know or, if you would like further information, or have Project/Proposal/Research Ideas - Call Us, E-Mail Us, Snail-Mail Us, or Fax Us!

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Appendix B:

Words, Words, Words

Community Development - CHA

WORDS, WORDS, WORDS
what these words mean to us in the
"Community Capacity Building & Asset Mapping©" context

September, 1997

Assets~~   gifts~~   talents~~   capacity~~   potentiate~~

- **Assets** are skills and abilities that are of value to one's self and others.
- **Gifts** are skills, abilities or qualities that are perceived as unique or special by the individual and those with whom the gift/s is/are shared.
- **Talents** are skills or abilities that people are comfortable sharing.
- **Capacity** is the potential for sharing assets, gifts and talents. To reach capacity, citizens recognize and are willing to share gifts, assets and talents. This word is becoming a buzz word!!
- **Potentiate** - to make more effective and to make full use of what you have.

Individual Citizen Action~~   Empowerment~~

- **Individual Citizen Action** is action which is initiated and driven by individual citizens. This action may be accomplished with service providers as resources.
- **Empowerment** may mean different things to different people. There are two predominant thoughts:
  - believing it is in your power to pass power to others. It is false power, however, because it was not initiated from within the individuals. It can be taken as easily as it was given.
    OR (the definition we believe is correct)
  - recognition of the power already existing in others - nurturing another's ability into a state of sustainable "power".

Community Health~~   Public Health~~

- **Community Health** - reflects the responsibility and capacity of a community to create, promote and protect health and to support those whose health is threatened.
- **Public Health** - The art and science of preventing disease, prolonging life and promoting health through organized community effort.

Asset based~~   Needs based~~

- **Asset based** is an initiative which evolves from individual abilities and capacities and nurtures interdependence.
- **Needs based** is an initiative that is developed from deficits and inabilities and creates dependencies.

Community connections~~   *community animation~~*   *community action~~*

There is a continuum between these three:

▸ **Community connections** are natural partnerships or linkages that exist or have the potential to exist among individuals and groups and may result in...

▸ **Community animation** is the development of spirit and enthusiasm within individuals and groups and may result in....

▸ **Community action** is shown when initiates are driven by community citizens (outside of government and agencies), they are driven by individuals having common interests.

Service Providers~~

▸ **Service providers** are individuals who provide professional expertise to others

Community - centred ~~   *Community focussed~~*
Community Based~~   *CommunityOutreach~~*

▸ **Community centred** means created and driven by
   individual citizens and community groups within their living context:
   • developed and implemented by community citizens
   • community citizens are the drivers and the doers (community driven)

▸ **Community focussed** means community groups and some individuals have had some input into the initiative, the initiative may answer some of what the community wants - the community probably is not directly involved in development and implementation.
   • developed with some community consultation (usually Focus groups), implemented by service providers as the drivers and doers.

▸ **Community based** means a former centralized organization has split up/decentralized and now is set up and delivers services in the community.
   • developed and run/serviced by service providers.
   • service providers are the drivers and the doers.

▸ "**Community Outreach** means recruiting for government programs - using "the community's" trust and then abusing the trust by programs being developed without community as a meaningful partner."(Molly Cooley-Portland, Oregon)

Community Capacity Building & Asset Mapping© ~~   *Resource and Information Gathering~~*
Capacity Building~~   *Steps To Capacity Success©~~*   *Asset Mapping~~*

▸ **Community Capacity Building & Asset Mapping©** means recognizing the gifts/assets/talents of each person within a community. Discovering and sharing these gifts with each other and reaching full capacity together - limitless possibilities. Community Capacity Building & Asset Mapping© - means building and growing from within the community and from within an individual. The citizen and the community are recognized for their strengths and abilities and the community building is based on where they are and who they are with their unique skills, abilities and gifts!!

▸ **Capacity Building** may only mean "adding on", not utilizing what a person already has in terms of gifts/assets and talents, so this is an add on, not a building on AND resourcing from the gifts, assets and talents that a person has. This term may be used in the Human Resource and management areas, when they market new courses within health and social reform context (buying into the lingo). Be careful!! often the individual can be stereotyped and existing gifts/assets and talents are not acknowledged.

▸ **Steps to Capacity Success©** may be used as a guide to initiate Community Capacity Building. The steps that nurture the discovery of resources, assets, and skills existing within a community. The steps encourage connecting and linking between citizens, between organizations and between citizens and organizations, to develop an animated and active community where community driven planning can take place. The steps suggest that the group talk to businesses, associations and individuals to gather information about their assets/skills/abilities and their interest in sharing these with the community. A written comprehensive report and a newly created asset map are usually included in the steps (refer to Appendix B - Community Capacity Building & Asset Mapping© Model Summary). .

▸ **Asset Mapping** - A visual representation of the resources, assets and gifts discovered within a community of individual citizens, businesses and associations through Community Capacity Building. The map illustrates the existing connections or the potential connections between groups and/or individuals

▸ **Resource and Information Gathering Study** is information gathering about the resources, skills, and assets in place in the community. This is information gathering only and does not nurture community connecting, animation or action. There is information gathering from sources such as directories, phone books, and a walkabout.

Community Health Development~~   *Community Development~~*
          Health Promotion~~   *Community Outreach~~*

▸ **Community Health Development** and Community Development can be the same, however CHD is more Health centred and is the term used right now by Public Health Services - Capital Health Authority. The CD model used in some cases, may not be Community Capacity Building & Asset Mapping© however, you have to see how things are done and by whom.

▸ **Community Development** can mean many things to many people and is always changing - now a buzz word!!.

▸ **Health Promotion** is setting better health as a goal and managing the process of change toward the goals are crucial elements of health promotion. (How do we make the school/workplace/city a healthier place, in order to support X in practising healthier behaviour?

▸ **"Community Outreach** means recruiting for government programs - using "the community's" trust and then abusing the trust by programs being developed without community as a meaningful partner." (Molly Cooley - Portland, Oregon)

Community~~
▸ **Community** is whatever one wishes it to be.
    • but it is always
       ✎ more than one person
       ✎ sharing
       ✎ commonalities
John McKnight and Alexis de Toqueville - there is a community when a group HAS the power to decide what is a problem, the power to decide how to solve the problem, and the power to become an active part of implementing the solution.

Community Health Status~~   Needs Assessment~~
Community Capacity Building & Asset Mapping©~~

► **Community Health Status** - Burdine and Felix have done a lot of work in this area with the Medical Outcomes Trust and the Short Form 36 and Short Form 12. The health status approach is also used as a community animator. It looks at measuring the health status of a total population in specific subgroups, and determining factors producing health/ill-health and developing interventions to improve health and understand problems and solutions. This group does go into the community and has focus groups etc., and uses the SF (administered to individuals) to see the now picture and how the results compare to the norm. The community then looks at the major issues in relation to the norm. The initiatives that this group has lead have usually been with public health, (refer to Healthcare Forum 1995 material).

► **Needs Assessment** means asking "what do you need?" The needs assessment approach can be modified to ask "what are issues for you?" which at least allows some action because an issue opens the door for discussion about solutions. Needs assessment identifies needs and gaps and does not engage people in the process. It is a dead end street that perpetuates the medical service provider model unless the starting point has been focussed on the assets of the community and the citizens.

► **Community Capacity Building & Asset Mapping**© means recognizing the gifts/assets/talents of each person within a community. Discovering and sharing these gifts with each other and reaching full capacity together - limitless possibilities. Community building - means building and growing from within the community and from within an individual. The citizen and the community are recognized for their strengths and abilities. Community Building begins with their unique skills, abilities and gifts!!

OTHER TERMS

► *Alliance~~* groups getting together to do something - a new buzz word for partnership.
► *Association~~* is not-for-profit organization that can be either government or non-government.
► *Business~~* is a for-profit organization
► *Collaborate~~* Individuals or groups working together in an atmosphere of sharing to accomplish common goals.
► *Collective action~~* means combining resources and working together toward the attainment of a common goal.
► *Collective~~* Together (As in collective action)
► *Community Organizer~~* is a member of the community, could be an outsider, who takes the initiative to gather people and resources to act around the development of that community.
► *Community Assessment~~* is new terminology and may mean all inclusive information gathering and sharing about the community - needs, resources, gaps etc.
► *Community Profile~~* A snapshot view of a community which usually includes demographic information and a summary of observations made during a walkabout/driveabout.
► *Cooperate~~* Individuals or groups working together in a mutually beneficial and open way.
► *Dependent~~* This is one way. The capacities of one person are fed by the deficiencies of another. This one way never changes - one is dependent and the other always independent. Capacities and control are from one person not between two. There is one powerful one.

- ▸ *Facilitator*~~ Is a person (or group) who supports a group of people, not by leading, but by assisting them in discovering, developing and realizing their own direction, goals and outcomes.
- ▸ *Government Association*~~ is an arm or department of the government, not in the business to make money.
- ▸ *Individual*~~ is a citizen or member of a community either geographic, cultural, or topical.
- ▸ *Interdependent*~~ - This means two way sharing. There is give and take on both sides, the capacities of each are shared and people and groups are working together. The group requires each others capacities to be effective they are interdependent. There is an ebb and flow to the exchange. Everyone has something to contribute and their time for contribution will arise as they share with others. All have power.
- ▸ *Non-Government Association*~~ is any other association which is not under government but may receive government funding and is not in the business to make money.
- ▸ *Non-Visible Association*~~ is usually an informal group that may not have a space of their own to meet and therefore is not easily located either visually or through a directory.
- ▸ *Partnership*~~ is two or more groups or individuals joined in a shared and mutually beneficial relationship, working toward a common goal.
- ▸ *"The Doer"*~~ of any community initiative must be the community itself, not an outside group, organization or individual. (Although, there may be an outside facilitator)
- ▸ *Visible Association*~~ is usually a formal group that is easily located by walking around the neighbourhood or looking in directories.
- ▸ *Walkabout/driveabout*~~ Driving or walking around a neighbourhood observing things and uniqueness in the neighbourhood. These observations could range from the businesses and associations seen, playgrounds, security systems, lawn maintenance, house appearance, numbers of single family dwelling versus multiple dwellings, Neighbourhood Watch and Block Parents etc.

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Appendix C:

Community Capacity Building and Asset Mapping© Model

COMMUNITY CAPACITY BUILDING & ASSET MAPPING©: MODEL SUMMARY

September. 1997

SUMMARY

There are new opportunities as changes in health and social systems shape and open "new ways" for community centred and driven initiatives. The Community Development Office of the Caritas Health Group in Edmonton, Alberta conducted a pilot project in community capacity building, surveying, and asset mapping, with the Glenwood Community League in the Summer and Fall of 1994. The project provided an opportunity to begin the development of a model for Community Capacity Building and Asset Mapping©. The goals of "Community Capacity Building & Asset Mapping©" are to: discover the assets and capacities of a community, design an asset map that graphically shows the supports and their connections, develop a community resource for community supports, connect and animate community citizens and to nurture relationship building.

This update adds to the steps already delineated in the community capacity building, surveying, and asset mapping model. Many other "Community Capacity Building & Asset Mapping©" projects, using the Steps to Capacity Success© have been completed since Fall 1994 providing the information for these enhancements to the original Fall 1994 document. A "Community Capacity Building and Asset Mapping©" workshop has been developed to provide community groups and service providers with an opportunity to develop an understanding of "Community Capacity Building & Asset Mapping©" and the Steps to Capacity Success©.

KEY MODEL ELEMENTS - "STEPS TO CAPACITY SUCCESS©"

The six key steps delineated here are what we have seen to be the common starting points for "Community Capacity Building & Asset Mapping©".

1. **DEFINE THE QUESTION AND THE FOCUS**
    *   participate in a "Community Capacity Building & Asset Mapping©" workshop
    *   bring together a group to learn, to discuss and create a plan for Community Capacity Building & Asset Mapping©
2. **INITIATE**
    *   establish key community contacts
    *   refine questions
    *   develop community partnerships, networks and links/working groups
    *   complete a community "walkabout" and gather community profile information
    *   make use of existing research resources (ie. key print and technological resources with the community)
    *   confirm geographic boundaries (if appropriate)
    *   develop a short paper description of the Community Building
    *   inform community members via their newsletter, the media and by attending community gatherings/meetings
    *   develop goals and objectives
    *   develop timeline

3. DESIGN QUESTIONNAIRE and DATABASE
- design questionnaires for individuals, business/associations or any groups which are to be included.
- for ease of database design, write questionnaires in logical order and ensure that each question requires only one answer.
- set up separate databases to complement each questionnaire

4. CONDUCTING THE SURVEY
- develop a comprehensive list of all businesses and associations
- develop a paper description of what you are doing to give to each questionnaire respondent or contact
- develop a plan for interviewing citizens, businesses and associations
- conduct a volunteer training session with volunteers
- initially administer questionnaires with as many project partner members as possible
- connect with key people in key organizations - interview and complete a questionnaire with them
- conduct questionnaires with owner/manager/supervisor in the organization
- expand organization lists as questionnaires are completed and new information emerges
- conduct questionnaire in person whenever possible to ensure relationships are developed
- during administration of the questionnaire make the information sharing and gathering mutual
- data input

5. PUTTING IT ALL TOGETHER
- create an asset map from the information you have to date
- describe what happened and discuss the results to date through a written account

6. COMMUNICATE
- develop a summary (feedback loop) and send a copy to all survey respondents
- present copies of the written account to all key parties
- communicate results with communities and groups inside and outside the community/ies that navigated the Community Capacity Building & Asset Mapping© project
- keep a record of to whom the written account and summaries (feedback loops) have been sent

CONCLUSION

The **Community Capacity Building and Asset Mapping Model**© can be applied in any setting. Community Development, Community Care and Public Health and *"Community Building Resources"* ᵈ⁾ have been involved in a variety of Community Capacity Building & Asset Mapping© and Steps to Capacity Success© initiative in urban and rural neighbourhoods asking questions around supports for health; Community Capacity Building & Asset Mapping© also started with questions about food supports, supports for stress management, recreational support for youth, community connections for youth, and supports for children. Remember these elements, often called the Steps to Capacity Success©, are only the beginning of "Community Capacity Building & Asset Mapping©". Full accounts of some of these initiatives are available upon request from the Community Development office, CHA - Community Care and Public Health and *"Community Building Resources"*ᵈ⁾. In the summer of 1997 a reflection was conducted with seven of the communities who chose to use "Community Capacity Building & Asset Mapping©". The lessons learned during this reflection, "Listen & Learn - the answers are with the communities" is available at this office.

Please feel free to contact the office if you have any questions of would like further information.

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Appendix D:

Community Development WWW Home Page

COMMUNITY DEVELOPMENT
Capital Health - Community Care & Public Health

Welcome to the Home page for Community Development - Community Care and Public Health, Capital Health Authority - in Edmonton, Alberta - Canada.

For all of our old friends and our new ones, please note that our Web Site has moved - our new address is: *http://www.cha.ab.ca/commdev*. As you can see it's an easier one to type as well as remember - so please change your bookmarks!!

We are a small dynamic office that is an arm of the Capital Health Authority in Edmonton, Alberta; located in a classroom in Jasper Place High School, Edmonton. Our numbers are small, there are three of us who are here most of the time - Johanna, Angie, and Susan, - but we also have a great mix of community contractors and volunteers who "hang their hats" here depending on what is happening through our office.

Our group practices the philosophy of "Community Capacity Building", where we believe each citizen, community, organization, and business has gifts to share with others. It is believing everyone has gifts and supporting each other in the discovery and mobilization of these gifts. We have a reference list that includes insights and publications, which have provided a sound base and resources for what we do (these include some of Kretzmann's and McKnight's work).

This small office has become a resource and research connector supporting the development and sharing of new community and neighbourhood discoveries and existing community resources. Our fun and exciting work with Glenwood, an Edmonton neighbourhood, resulted in the development of a model or path for Community Capacity Building and Asset Mapping© (developed when we were with Caritas).

Our experiences in Community Capacity Building & Asset Mapping© - the Steps to Capacity Success© - have broadened our horizons and our understanding of people. We have been delighted to work with other neighbourhoods and community groups as they use Community Capacity Building & Asset Mapping© in a variety of settings and with a variety of questions. The general goals of Community Capacity Building & Asset Mapping© are to:

- discover the assets/capacities that a community and its citizens are willing to share to support their community

- design an asset map that graphically shows the supports and their connections

- develop community resources for community supports

- nurture relationships that will result in community animation and action.

You can see some of the next steps from the Steps to Capacity Success© that emerged, by reading about our many and eclectic community connections. These connections have opened doors to a variety of partnerships and unusual linkages. We now see things happening in the communities and neighbourhoods as they move forward to bring in the rich gifts and other resources they have discovered together to enrich both the economic and social life of their community.

We have had strong involvement with groups who work with youth, schools, agencies etc.. This work is grouped together as well and dispersed throughout under other subheadings..

We have developed a Community Capacity Building & Asset Mapping© Workshop which interactively guides the participants in developing their "asset focused" thinking and determining where the "no longer strangers" fits in their own life context. The workshop assists the participants in planning their own "Steps to Capacity Success©" with their neighbourhood/community.

Other workshops that we have are:

- "Spark" Workshop - To develop facilitation ability

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- Planning Alternative Tomorrows with Hope (P.A.T.H.) a graphic visioning exercise
- Proposal Writing - Just Do it

We are now developing two new Community Building Workshops:

- "Kids are Key"
- "Being Involved and Liking It" - Business and Community Spearheading Change

* Please note:

We now use the term "Steps to Capacity Success©"; as community groups told us Capacity Study was not a good term.

After three years of Community Capacity Building and Asset Mapping© with the Steps to Capacity Success© we spent time this summer revisiting our community friends to see what is happening. The results of this reflection on community building are collected in a paper entitled "Listen and Learn...The Answers are with Communities" the key learnings from which were presented at the CDS Annual International Conference in Athens, Georgia, USA in July 1997. This paper will be completed by September and the summary will be included on our web site.

If you are involved in community building and grassroots community work, share with us. Call, write, FAX or e-mail. We have included our latest newsletter (our next one will be ready by October) for your reading pleasure and an order form - "Things to Share" for items which you may find useful! We have meet many new friends through the Internet; if you would like to visit their web sites please click here.

Get in touch, there are lots of ways!!

For more information:

Susan Roberts, Angie Dedrick or Johanna Walkner
Community Development Office
#681 8950 - 163 Street
Edmonton , Alberta - Canada
Phone: (403) 484-9045
Fax: (403) 484-9099

e-mail: cdoffice@cha.ab.ca

World Wide Web site: http://www.cha.ab.ca/commdev

September 10, 1997

Appendix E:

Participating Communities and Neighbourhoods: Background, Executive Summaries, and Feedback Loops

Community Capacity Building and Asset Mapping©
"Steps to Capacity Success"©
Model to reality
Community Development - Capital Health - Edmonton AB

Participating communities/neighbourhoods - summaries and feedback loops

Children's Services (C1 and C2) - West Edmonton "it takes a whole community to raise a child" - Edmonton Alberta

Central Edmonton Capacity Study - "meeting food requirements" (F1 and F2) - Edmonton Alberta

Glenwood Community Capacity for Health Supports (G1 and G2) - "People helping people" - Edmonton Alberta

Millhurst Capacity Study (M1 and M2) - "discovering our community" - Edmonton Alberta

Oliver Community Capacity and Assets for Heath Supports (O1 and O2) - "people helping people in health" - Edmonton Alberta

Stratford - Mobilizing the Spirit of Stratford (S1 and S2) - "building capacity to support community health" - Stratford Prince Edward Island

Whitecourt and Community Capacity Study (W1 and W2) - "Discovering the S.P.I.C.E. of Whitecourt" - Whitecourt Alberta

Children's Services (C1 and C2)
West Edmonton

"it takes a whole community to raise a child" - Edmonton Alberta

- Took place in West Edmonton where there is a population of approximately 100,000.
- New and older areas
- Expanding rapidly with much urban sprawl
- Concentrations of residential and commercial
- Mixed population - that is of ages, culture and ethnicity

"It Takes a Whole Community to Raise a Child"

West Edmonton Children's Services Capacity Study - Summary
July 1995 - March 1996

Thank you for being a part of the West Edmonton Children's Services Capacity Study. Thanks to you and many other citizens, businesses and associations, the West End Working Group on Children's Services has discovered that the people who live and work in West Edmonton have an incredible abundance of assets and resources to share in support of the growth, development and safety of children.

WHO IS THE WEST END WORKING GROUP ON CHILDREN'S SERVICES?
In November of 1994 the Minister for Family and Social Services announced a 3 year plan to redesign the delivery of Children's Services. This plan emphasized community contribution. Over 150 Working Groups were formed throughout Alberta to develop a new plan for Children's Services. The West End Working Group on Children's Services is one of fourteen working groups in the Edmonton region.

WHY WAS THE CAPACITY STUDY CONDUCTED?
The West End Working Group on Children's Services believes that "it takes a whole community to raise a child", and wanted to find a way to:
- encourage more citizens and youth to be a part of the planning, and
- discover the existing and potential supports for children in West Edmonton.
    The Community Capacity Study was the path the group chose because it includes as many citizens, businesses and associations as possible, and nurtures the development of meaningful partnerships and connections. As well it encourages community and citizen animation, action and planning toward a collective goal or vision.

Recognizing the limited time and resources within the West End Working Group, the Capacity Study Committee decided to conduct comprehensive Capacity Studies in four of the fifty West End communities. The four neighbourhoods selected by the Capacity Study Committee were Ormsby Place, Crestwood, Elmwood, and Britannia/Youngstown. In addition to the four neighbourhoods, the Capacity Study Committee felt it would be beneficial to the working group to conduct a Capacity Study with child-related businesses and associations in the West End.

WHAT DID THE CAPACITY STUDY DISCOVER?
Members of the West End Working Group and volunteers from the community spent time talking to citizens, businesses and associations to discover the skills and abilities that people had and would be willing to share to support children. As well, youth from H.E. Beriault interviewed their peers and assisted the working group when they met with the elementary students at Ormsby Elementary School.

In all, 36 businesses and 48 associations shared about their capacities to support the growth, development and safety of children. The Businesses and Associations had many resources to share in support of children, including:
- ✔ education and health opportunities
- ✔ child care
- ✔ spiritual guidance
- ✔ financial assistance
- ✔ developing new partnerships
- ✔ sports, recreation and environmental programs
- ✔ support for youth and families
- ✔ employment opportunities
- ✔ promoting safety and cultural awareness

It is exciting to realize what incredible potential the businesses and associations have to support the community! What is even more exciting is that 52% of the businesses and associations said they were interested in being involved with the West End Working Group!

Citizens of West Edmonton also have tremendous assets to contribute to
the community! A total of 424 citizens were interviewed: 96 adults,
49 Junior High students and 277 Elementary students.
The adults and Junior High students said they had experience or talent in:

- caring for children of all ages
- writing, reading and story telling
- recreation and sports
- music
- computer operation
- 16 different languages!
- making kids laugh
- animal care

- cooking and bulk grocery shopping
- volunteering
- first aid/CPR
- home maintenance
- art
- business ownership
- caring for elders
- women's sharing circles

What is phenomenal is the number of people who said they were willing to share their talents -
95% of the adults and 73% of the Junior High Students!

The elementary students made a unique contribution by drawing pictures and writing
short stories about how they could make their community a good place in which to
live. Their drawings were insightful, as they showed some of the capacities and gifts of
children. Some of the themes that the children drew included recycling, picking up
garbage, helping their parent(s) around the house, encouraging parents to walk or bike
- not drive, calling a block parent when in danger and helping in the garden.

It is remarkable to realize the potential we all have to support children! Often we do
not recognize or give credit to the talents and skills we develop at home, school, the
workplace, community or church. Youth and children are also an incredible resource!

WHAT'S NEXT?

The most exciting result of the West Edmonton Children's Services Capacity Study is the fact
that a foundation has now been created from which to build a plan for Children's Services in the
West Edmonton.

The plan that the West End Working Group is devising will affect us all. The West End Working Group
believes it is important to build on the discoveries made during the Capacity Study and ensure that we all
have the opportunity to become involved.

The West End Working Group will make a concentrated effort to contact those citizens, businesses and
associations who said they were interested in this initiative.

If you would like to learn more about this initiative please attend the next meeting :
    When: Tuesday, May 21
    Time: 7:00 pm
    Location: Bent Arrow (#203, 11501 Stony Plain Road)

For more information call Shauna at 481-3451 or Angie or Susan at 484-9045.

Together we can make a difference for our children!

EXECUTIVE SUMMARY

In November 1993 a Commissioner of Services for Children and Families, Region 10 was appointed by the Alberta Government to redesign children's services. An Action Plan which focused on integrated services, community delivery, aboriginal services and early intervention was created, and 150 working groups throughout Alberta were given the task of actualizing the plan. The West End Working Group on Children's Services (WEWGCS) is one of fourteen working groups in the Edmonton region.

Although the group was open to all citizens, very few community citizens joined. The majority of the people in the group were individuals from government and non-government service agencies. The WEWGCS established two main priorities which they felt had to be addressed before a plan for children's services could be developed. These priorities were:
- Nurture the development of a broader more representative working group, including more community citizens and youth.
- Explore the West Edmonton community to discover the formal and informal supports, which already exist for children.

In order to meet the priorities discussed by the WEWGCS, the group decided to conduct a Community Capacity Study in the West End. A Community Capacity Study is an unique, all inclusive path to build community, that nurtures the development of meaningful connections and partnerships, and encourages community and citizen animation, action and planning toward a collective goal or vision. A Capacity Study Committee was formed to plan, implement, and manage the study. In order to begin the Capacity Study, ten members of the Capacity Study Committee attended a full day "Building on Capacities" workshop.

During the workshop, the Capacity Study Team determined the question on which the Capacity Study would focus: " What supports do you have to share toward the growth, development and safety of children?". The theme, "It takes a whole Community to raise a child", was also adopted for this study, and one of the Capacity Study Team members created a picture which was used as a logo to compliment the theme.

The following goals were established for the West Edmonton Community Capacity Study:

1. To gather information from within the West Edmonton community on the skills and capacities, or "gifts", that individuals, businesses, and associations (governmental and non-governmental) possess which could potentially provide supports in planning for the growth, development and safety of children.

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2. To develop an accessible resource base that the community could draw upon in the development of community based children's programs.

3. To develop and nurture linkages and networks among community members and organizations which could serve as a basis for the sharing of information as well as the impetus for supporting programs for children in the West Edmonton community.

Recognizing the limited time and resources within the WEWGCS, the Capacity Study Committee decided to conduct comprehensive Capacity Studies in four of the fifty West End communities. The four neighbourhoods selected by the Capacity Study Committee were Ormsby Place, Crestwood, Elmwood, and Britannia/Youngstown. In addition to the four neighbourhoods, the Capacity Study Committee felt it would be beneficial to the working group to conduct a Capacity Study with child-related Businesses and Associations in the West End.

The Capacity Study Committee developed two different questionnaires for the survey, a Business and Association Questionnaire, and a Citizen Questionnaire. The Business and Association Questionnaire consisted of open-ended questions that ask what services the business or association is currently providing, what else they could do to support the growth, development, and safety of children, and whether they were willing to get involved. The Citizen Questionnaire consisted of questions about individual skills and abilities that required simply a 'yes', 'no', or 'some' response. The Citizen Questionnaire was also used to interview youth.

Business, association and citizen questionnaires were predominantly administered in person, although some were completed over the phone. Youth Questionnaires were conducted by students at H.E. Beriault Junior High School. In addition, since the Capacity Study Team had developed a strong partnership with the H.E. Beriault students, the Capacity Study Team asked the students to assist them in talking with the elementary students at Ormsby Elementary School.

The Capacity Study Committee was successful in talking to 36 Businesses, 50 Associations, and 425 Citizens. The results of the four Community Capacity Studies and the West End Child-related Businesses and Associations Capacity Study showed that businesses and associations definitely have a lot to share in support of children. About half of the businesses and associations indicated they were interested in being involved with the WEWGCS - 45/84 (54%) said yes, and a much higher percentage of the businesses and associations indicated that they were interested in being kept informed - 71/84 (84%) said yes.

A total of 425 citizens were interviewed, 96 adults and 50 Junior High students and 277 Elementary students. The results show that citizens have tremendous assets to contribute to the community. What is remarkable is the number of people responding to the citizen questionnaire who said they were willing to share their talents - 96% adults (95) and 73% of the Junior High students (36). In addition, 46% of the adults (45) and 47% of the Junior High students (23) said

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they were interested in being involved with the WEWGCS. The Ormsby Elementary students made a very unique contribution to this Capacity Study. The drawings and stories they created showed how even young children can positively contribute to their community.

The West Edmonton Children's Services Capacity Study had many positive outcomes, however several factors seemed to hinder it's success. The limitations included the lack of faith in the Commissioner's Office, the ramifications of applying for funding, the limited volunteer time, and the loss of motivation and enthusiasm as a result of the limitations. Despite these limitations, the Capacity Study was in fact very successful. A strong foundation has now been created for Children's Services. By connecting with and nurturing the involvement of the citizens, businesses and associations who participated in the Capacity Study, the WEWGCS can begin to build a plan for Children's Services in West Edmonton.

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Glenwood Community Capacity for Health Supports (G1 and G2)

"People helping people" - Edmonton Alberta

- Took place in a west Edmonton neighbourhood with a population of approximatelty 4500
- Older neighbourhood
- Predominantly residential with one major business/retail street
- Mixed population

GLENWOOD COMMUNITY LEAGUE   CARITAS HEALTH GROUP
"PEOPLE HELPING PEOPLE IN HEALTH"

GLENWOOD IS RICH IN RESOURCES TO SUPPORT HEALTH!!!

Thank you for taking the time to complete the Glenwood community capacity survey with our volunteers. Thanks to you and many other businesses and individuals in your neighbourhood, we have been able to collect some valuable information about the skills and abilities of the individuals, businesses and associations who reside or operate in Glenwood. This very exciting information means OPPORTUNITY for all those who live and work in Glenwood!

WHY WAS THE SURVEY COMPLETED?

In an effort to eliminate the deficit, our government has made massive cuts to health care. This leaves many of us feeling as though we've lost control of our own health. The purpose of this study was to show the Glenwood community that it is possible to regain some control of health. The survey results show that the community has many assets that lie within its own boundaries, and we are pleased to make this information available to all the residents and businesses of Glenwood.

WHO WAS RESPONSIBLE FOR DOING THIS SURVEY?

This survey was completed by the Glenwood Community League, in partnership with the Community Development office of the Caritas Health Group. Yours is the first community to take part in this venture, and it is hoped that more communities will come on board. The Caritas Community Development office acts as a community animator, encouraging networking among individuals, businesses, and associations, supporting the creation of new partnerships and opportunities, and building on community strengths.

HOW DOES THIS INFORMATION MEAN OPPORTUNITY?

The information collected during this survey is an inventory of the community's assets. We wanted to show the community what it has to support health. This information could turn ideas into business ventures, as people come together to share their resources. Everyone has special skills and abilities which can be shared. By identifying these resources, we can see many opportunities arise for new business and job opportunities. Our goal has been to provide the community with this information, but its up to YOU to take advantage of it.

WHAT WERE THE RESULTS?

We found some very exciting results! We surveyed 172 households, 112 businesses, and 28 associations in Glenwood. Here is a sample of what you said:

Individual households said that they had, and may be willing to share, the following experience:

- caring for the elderly (55 people)
- caring for the sick (71 people)
- preparing food for numbers over 10 (79 people)
- bulk food purchasing with other people (49 people)
- vehicle maintenance (42 people)
- electrical (46 people)
- plumbing (45 people)
- mechanical (66 people)
- teaching (29 people)
- plus much, much more...

Businesses and associations also had a great deal to offer. In fact, they had so much to offer
and share in support of health and wellbeing that we decided to map it out! The map below
shows the results. The business and associations of Glenwood said they could provide
support in eight main areas. These areas include learning, spiritual/restive, support for
seniors, support for basic necessities, health promotion, safety, environment and quality of
life. Check it out!!
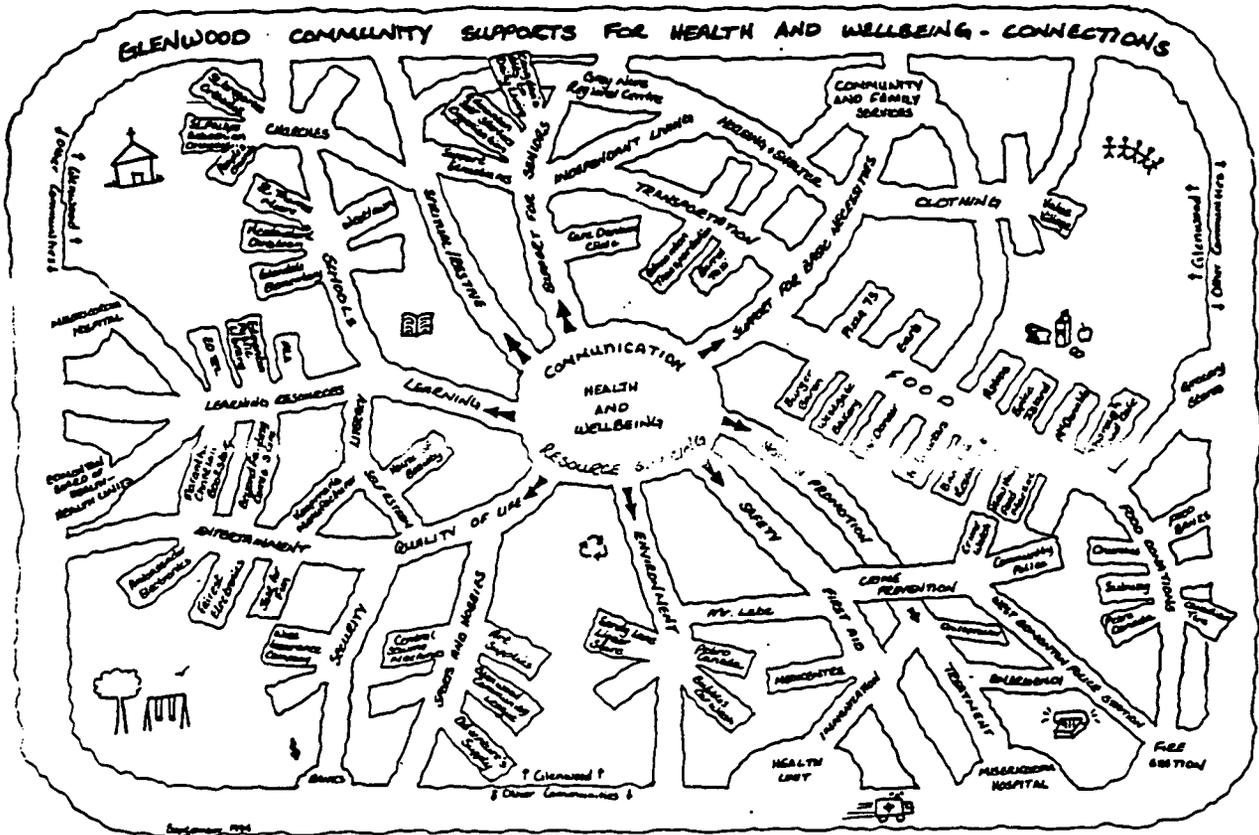
Please note: The business and association names listed above are only those who said they
were interested in being involved in this initiative. We are confident that many more will
emerge.

HOW CAN YOU ACCESS THIS INFORMATION?

The Glenwood Community League offers easy access to this valuable information. All you
have to do is contact the president of the League, Gary Racich, at 452-3190. The information
is also kept at the Community Development office at the Jasper Place High School. Contact
Susan Roberts, Community Development Coordinator, at 482-8327. A full report of this
Community Health Capacity Study is available at both of these locations.

IT'S ALL HERE!!

Central Edmonton Capacity Study

"meeting food requirements" (F1 and F2) - Edmonton Alberta

- Took place in eleven urban neighbourhoods in Central Edmonton, with a population of approximately 60,000.
- Older part of Edmonton
- Area includes the inner city
- Mixed population
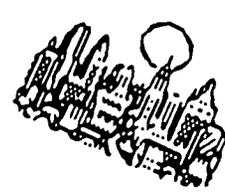
MEETING FOOD REQUIREMENTS

CENTRAL EDMONTON CAPACITY STUDY

Thank you for taking time to speak to our volunteers about what Central Edmonton has in place for people having difficulty meeting their food requirements. Thanks to you and others we have been able to gather some very valuable information.

WHY WAS THE SURVEY COMPLETED?

There are people in Central Edmonton who have difficulty meeting their food needs. A concerned group got together to discuss the issue and agreed that a capacity study would be conducted to explore "What is available in Central Edmonton to provide food for those having difficulty meeting their food needs?" The philosophy of conducting capacity studies is to encourage building on the capacities of individuals and groups.

WHO WAS RESPONSIBLE FOR DOING THIS SURVEY?

This survey was completed by two Dietetic interns working with the Caritas Health Group Community Development office. The results were reported to the concerned group and some of the respondents who were able to attend, on October 26, 1994.

WHERE WAS THE SURVEY CONDUCTED?

This study was conducted within the boundaries of the river to the south, 124 Avenue to the north, 90 Street to the east and 124 St. to the west. Within these boundaries eleven community leagues exist, and this was determined to be an effective way to divide and organize the information.

HOW WAS THE STUDY CONDUCTED?

Members of the concerned group were initially contacted to assist the surveyors in beginning to find food support resources in place in this community. A questionnaire was designed around the topic of "supports for food". Individuals from the various food support groups that were found were interviewed in person or on the phone. The information gathered from 94 surveys, was entered in a data base set up in Microsoft works.

WHAT WERE THE RESULTS???

Twenty-six different types of food supports were identified (see asset map on back). It was found that there is a large concentration of these supports in the McAuley and Boyle Street areas, and from there supports thin out.

WHAT ARE THE QUESTIONS EMERGING FROM THE STUDY???

- What about consideration for adolescents and what about supports for together families to access programs? There are programs that are targeted to women, elementary school-aged children, and seniors.
- What about consideration of those living with HIV/AIDS and those with mental and physical disabilities? Few programs considered people with health problems.
- What abut people needing to meet their food needs in the evening or on the week-end? - Most programs operate during the weekdays.
- Is it necessary to track the users of the food supports? Some programs monitor the use of their services.
- Could these food supports be developed further to reach to the person as a whole, beyond the basic food need?

CENTRAL EDMONTON FOOD SUPPORTS - CONNECTIONS

FOOD SECURITY IN CENTRAL EDMONTON

Food Banks • Cupboards
Food Vouchers
Dinners
Collective Kitchens
Take Home Food
Food Hampers
After/Before School Snack
Summer Snack
School Snack
Snack Programs
Day Care
Kindergarten
High School Lunch
EAT IN MEALS
Low Cost Social Meals
School Lunch Program
Skill Development
AISH/Community Kitchen
Health for 2
Formula Program
FOOD + KNOWLEDGE FOR HIGH PRIORITY GROUPS
Head Start
People's Co-op
Clarification Centre
Low Cost Drugs
FOOD WITH SHELTER
Shelter
Half-way Home
Dom. Abuse

HEALTH AND WELLBEING
COMMUNICATION
RESOURCE SHARING
FOOD
Grocery Stores
Restaurants
TRANSPORTATION
MODERAH SHELTER
INDEPENDENT LIVING
SUPPORT FOR STREET MESSAGES
SUPPORT FOR SENIORS
SPACE & SUPPLIES
SPIRITUAL/FESTIVE
LEARNING
HEALTH PROMOTION
CARE PROVISION
Community Aide
Outreach
Treatment
Building
SAFETY
FIRST AID
Hospital
EQUIPMENT
ENVIRONMENT
FIRE RENTAL
QUALITY OF LIFE
SKILLS AND MODELS
LIBRARIES
CHURCHES
SCHOOLS
LEARNING RESOURCES
LITERACY
EDUCATION
ENTERTAINMENT

For More Information Contact:
Susan or Angie at the
Community Development Office
484-9045

November 1994

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EXECUTIVE SUMMARY

There are people in Edmonton who have difficulty meeting their food needs. On September 21, 1994, a core group of concerned people from the community leagues, churches, and other organizations like the Food Bank and the Caritas Health Group got together to discuss the issue of food security in the Central Edmonton area. In an effort to help those in need, the concept of community development, building on the capacities of these individuals and the existing food support systems, was used.

To identify gaps and redundancies that may exist in the central Edmonton food support system currently existing, a list was created of all individuals, groups, and associations that provide a service to people who have difficulty meeting their food needs. This research project was requested by the core group and taken on by two dietetic intern students to do the research and report back to them at the next meeting, slated for October 26, 1994. The identified area under study was within the boundaries of the river to the south, 124 avenue to the north, 90 street to the east and 124 street to the west. Within these boundaries, eleven community leagues exist and this was determined to be an effective way to divide and organize the information gathered.

Members of the core group were contacted. The intent was that they could help determine what resources are in place in the community. This information guided the researchers toward new food sources and the list began to expand as the researchers contacted and interviewed more people either in person or on the telephone. A questionnaire for prompting information about the food service provided was designed using resources for survey design and examples of other surveys used in similar projects (Kretzmann & McKnight, 1993) (Dedrick & Mitchell, 1994). Once the surveys were complete, the information was entered in a data base set up on Microsoft Works.

Ninety-four surveys were completed in a two week period . Some general results found throughout the study include information about types of services and the people they target. Twenty-six different types of food sources were identified for people to access when they need help meeting their food needs. It was also found that there is a large concentration of these services in the McCauley and Boyle Street areas and from there, the services thin out.

Questions that were posed for possible further study as a result of the analysis surrounded issues of:
- age specific programs - certain age groups and genders, have services targeted for them, such as women, elementary school aged children and seniors. What about consideration of adolescents who may have trouble meeting their food needs? What about services for families to access together?
- health specific programs - few programs consider people with certain health problems. What about consideration of those living with HIV/AIDS and those with mental and physical disabilities?
- timing of programs - most programs operate during the weekdays. What about people needing to meet their food needs in the evening or on the weekend?
- tracking of users of the programs - some programs monitor the use of their services. Is tracking an area of concern? What is the purpose of tracking?
- the whole environment in which services are provided - could this food opportunity be developed further to reach out to these people?

Millhurst Capacity Study (M1 and M2) -
"discovering our community"
Edmonton Alberta
- Took place in southeast Edmonton neighbourhood with a population of approximately 8200
- Residential and newer area of Edmonton
- Mixed population

EXECUTIVE SUMMARY REPORT

Millhurst Capacity Study - "Discovering Our Community"

Recently, there has been movement away from the health medical model, toward a community centred support approach for health. This movement, with its direction driven to some extent by the community, requires people in the community to reflect on what they already have in place to support this new approach. Capacity building discovers and nurtures the attributes and strengths of the community, connects and involves people during the discovery, and communicates the assets and connections to all community members. In this project, the Millhurst Community League and the Caritas Community Development Office (CD) collaborated to explore the Millhurst community's capacities and assets that support health, wellbeing and quality of life. Together, they asked businesses, associations and individuals the question:

"WHAT HEALTH SUPPORTS DO YOU HAVE THAT YOU WOULD BE WILLING TO SHARE WITH THE MILLHURST COMMUNITY?"

Millhurst is a predominantly residential community located in south-central Millwoods. The boundaries, as defined by the Millhurst Community League, are: the proposed outer ring road (Alberta Transportation) to the south, 23rd Ave to the north, 50th St to the east and 66th St to the west. The population of Millhurst is 8204 (1991 federal census). A Walkabout in Millhurst Revealed: 20 businesses/medical or public services, one visible association, 3 churches and 5 schools. Many organizations outside the boundaries of Millhurst were identified as integral parts of the community and therefore were included in the study.

The two goals of the Millhurst Capacity Study were:
1. To provide and promote accessible resources for the Millhurst community, these being a database and asset map, that can be drawn upon by community members for community health and wellbeing planning.
2. To establish linkages, connections and networks among community members and associations to promote community animation and information sharing around health and wellbeing.

Two different questionnaires were developed to gather information about the Millhurst community's capacities and assets for health support; one for businesses and associations and the other for individuals. The business/association questionnaires asked open-ended questions which included questions on the definition of health and about the supports the organizations have or could have to support health, wellbeing and quality of life for the Millhurst community. The individual questionnaires were designed to gather information about the health and wellness related skills and experiences each person has and is willing to share with the Millhurst Community.

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The questionnaires were administered either by phone or in person by the project team and volunteers. In total, 42 businesses, 21 government associations including schools, 26 non-government associations (including faith institutions) within and outside of Millhurst and 103 individuals living within Millhurst were surveyed.

Databases were set up on Microsoft Works 3.0 to organize the information from the individual and business/association questionnaires.

The results of this study show Millhurst and the surrounding area have the capacity to provide many health, wellbeing and quality of life supports to its community members through its businesses, associations and individuals. **Eighty three percent** of the businesses, **ninety-five percent** of the government associations, **ninety-six percent** of the non-government assocations and **seventy-eight** percent of the individuals surveyed said they would be interested in being involved in any initiatives that might emerge as a result of this project and have supports, skills and abilities to share with the Millhurst community.

The business and association respondents tended to define health broadly and holistically, including the physical, spiritual, emotional, social, psychological, mental, and environmental elements of health. Many of the businesses and associations believed that there are contributions they make, and more they could make to support community health and wellbeing. Supports for distinct groups such as families, children, women, immigrants, parents, low income and pregnant teens emerged as themes. These sectors also possessed a wealth of supports for formal and informal education, recreation and leisure, basic necessities (food, nutrition, clothing, safety, child care), financial security, quality of life, medical supports, social supports, fundraising and donations and community communication. **The individual citizen talents that were in abundance were caring for the sick, making these people feel at ease, preparing food for less than ten people, grocery shopping, driving a car, laundry, ironing, lawn care, painting, volunteer work, teaching, recreational activity, pet care, nutrition and nursing care.**

Upon completion of the capacity study, an Asset Map was created to visually describe the potential connections between the businesses and associations around the theme of health and wellbeing supports. **The capacities, assets and potential connections shown on the asset map indicate great capabilities for community action around health, wellbeing and quality of life in and around Millhurst!**

The Millhurst Capacity Study was successful! There is now a resource list and asset map which illustrates the businesses, associations and individuals in and around Millhurst that are willing to share their talents and be involved in initiatives around community health in Millhurst. **The Millhurst community and surrounding area HAS the potential to 'connect' its resources and the capacity to support the health and wellbeing of its citizens!**

EXCITING DISCOVERIES SUPPORTING HEALTH & WELLBEING EXIST IN AND AROUND MILLHURST!

Thank you for taking the time to complete the Millhurst community capacity survey.
Thanks to you and all of the participating businesses, associations and individuals, some valuable information has been collected about the skills, abilities, assets and gifts that exist and can be shared with the community. Opportunities exist in the community; by having access to this information you can take advantage of these opportunities!

WHY WAS THE CAPACITY STUDY COMPLETED?

The recent movement away from the traditional health system to the community centered approach has left many feeling there are no solid supports for health. The purpose of this study was to assist the community in discovering what they already have in place to support this new approach, to provide a positive strategy for accepting the changes and to connect and involve people during the discovery.

WHO WAS RESPONSIBLE FOR CONDUCTING THIS SURVEY?

In this project, the Millhurst Community League and the Caritas Community Development Office (CD) collaborated to explore the Millhurst community's capacities and assets that support health, wellbeing and quality of life. The partnership acts as a community animator and encourages networking among individuals, businesses and associations, supporting the creation of new partnerships and opportunities, and building on community strengths.

WHAT WERE THE RESULTS?

One hundred and three individuals living in Millhurst, forty-two businesses, twenty-one government associations and twenty-six non-government associations were surveyed. **Eighty three percent** of the businesses, **ninety-five percent** of the government associations, **ninety-six percent** of the non-government associations and **seventy-eight percent** of the individuals surveyed said they would be interested in being involved in any initiatives that might emerge as a result of this project and that they have supports, skills and abilities to share with the Millhurst community.

Businesses and associations have a great deal to offer in support of health and wellbeing. In fact, they had so much to offer, that we decided to **map** it out! The Asset Map on the other side of this page shows the results. The businesses and associations have supports for distinct groups such as families, children, women, immigrants, parents, low income and pregnant teens. They also possessed a wealth of supports for education, recreation and leisure, basic necessities, financial security, quality of life, medical supports, social supports, fundraising and donations and community communication. The Asset Map was created to visually describe the potential connections between the businesses and associations around the theme of health and wellbeing. **The capacities, assets and potential connections shown on the asset map indicate great potential for community action around health, wellbeing and quality of life in and around Millhurst!**

The individual surveys also revealed some very exciting results! For example, the one hundred and three citizens surveyed said that they had, and may be willing to share, the following with their neighbours in Millhurst:

- caring for the sick (46 people)
- gardening (57 people)
- driving a car (90 people)
- laundry (81 people)
- Plus Much, Much More!....
- grocery shopping (92 people)
- teaching (51 people)
- computer skills (63 people)
- preparing and cooking food for less than ten (87 people)

The Millhurst community and surrounding area HAS the potential to 'connect' its resources and the capacity to support the health and wellbeing of its citizens!

THE NEXT STEP IS UP TO YOU!!

HOW CAN YOU ACCESS THIS INFORMATION?

The Millhurst Community League and the Community Development office offer easy access to this valuable information. Contact the League and leave a message at 462-3493 or contact Susan Roberts or Marci Scharlé, Community Development at 484-9045. A full report of this Capacity Study is available at both of these locations.

ASSET MAP
Millhurst Wellbeing Supports - "Discovering Our Community"

This Asset Map visually describes the potential connections between the businesses and associations who are interested in sharing the supports they have for health and wellbeing with the Millhurst Community. The *zig zag border* separates which businesses and associations are in and outside Millhurst; otherwise, the map does not show geographic locations.

From the centre, follow the 4 main theme stems as they branch out and interconnect all of the businesses and associations (in lower case letters). This may or may not represent the business or association's most obvious function but it shows how they directly or indirectly provide unique supports for health and wellbeing. Many provide even more supports than what is shown!

Note: The business and association names listed on the map are only those who said they were interested in being involved in this initiative. We are confident that many more will emerge.

May, 1995

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Oliver Community Capacity and Assets for Heath Supports (O1 and O2)

"people helping people in health"

Edmonton Alberta

- Tool place in Cnetral Edmonton and has a population of approximately 16,000
- Commercial and residential on fringe of downtown core
- Residential as condos and apartments
- Some older single dwelling homes, many now converted to apartments, many new condos on the river valley
- Many older residents

EXECUTIVE SUMMARY REPORT

OLIVER COMMUNITY CAPACITY and ASSETS FOR HEALTH SUPPORTS

The movement toward community health supports, and health direction being driven to some extent by the community, requires its members to reflect on what they have to support this new way. In this project, the Oliver Community League and Caritas Health Group Community Development (CD) collaborated in a capacity study to explore the Oliver capacities and assets that support health and asked businesses, associations and individuals:

> *"WHAT RESOURCES DO YOU HAVE THAT COULD SUPPORT HEALTH IN OLIVER and WOULD YOU BE WILLING TO SHARE THESE AND TO BE INVOLVED?"*

Capacity building and asset based community development encourages the discovery of supports that exist in the community. The discussion of **health** in this study refers to a complete state of wellness. It includes physical, emotional, spiritual, and mental well-being of all people.

Oliver, a neighbourhood located in downtown Edmonton, has a high population density of 15.190 in a 148 hectare area. Ninety one percent of the population, 1986, were renters. The Oliver walkabout revealed, 369 businesses, 66 medical/public services, 25 visible associations, 10 churches, 5 schools/training centres and 5 parks.

The three goals of the project were:
1. To gather information from within the Oliver community on the skills and capacities, or "gifts", that individuals, businesses, and associations (governmental and non-governmental) possess that could potentially provide supports for a community health plan for Oliver.
2. To develop an accessible resource base for the members of the community that could be drawn upon in the development of community based programs.
3. To develop and nurture linkages and networks among community members and organizations that could serve as a basis for the sharing of information as well as the impetus for supporting programs around health in the community.

Two different questionnaires were developed to gather information on the Oliver community's capacity and assets for health support; one for individuals and one for businesses and associations. The business/association questionnaires asked open ended questions including questions on the definition of health and about supports the organizations have or could have around health for the Oliver community. The individual questionnaires were designed to gather information about the health related skills and experiences each person has and is willing to share with the Oliver Community.

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The questionnaires were administered either in person, by phone or by mail by volunteers. Ninety seven businesses - twenty-eight percent of the Oliver businesses; twelve government associations - all that exist in Oliver, including schools, a hospital; fifty non-government associations - all the ones that could be found and include faith institutions; and one hundred and seventy individuals -one percent of the population were surveyed. The incredible number of apartments and condominiums was an added challenge for this project.

Databases were set up on Microsoft Works 3.0 to handle the results for the individual and business/association questionnaires and are not interchangeable.

In response to the question asking for a definition for health, most respondents defined health broadly and mentioned the physical, emotional. spiritual and mental dimensions. The health support themes that seemed to emerge from the business and associational sectors were supports for **distinct groups - seniors, disabled persons, persons with AIDS or HIV positive, gays and lesbians and aboriginals**. The recurring support themes showed the businesses and associations having supports in the areas of basic necessities (food, clothing and shelter), safety. financial security, quality of life, the medical area, personal care, spirituality, independence, advocacy, volunteering, rehabilitation, stress relief, fitness and leisure, education and employment and security. The individuals surveyed have a wealth of supports in many areas of health, personal care, and food!

Sixty-two percent of the businesses, **one hundred percent** of the government associations, **eighty-eight percent** of the non-government associations and **seventy percent** of the individuals surveyed, said they would like to be involved in any initiatives that come out of this project and have supports to share with the Oliver community.

The Community Capacity Study was successful. There is a now a resources list and asset map which illustrates the businesses, associations and individuals in Oliver that are willing to share their talents and be involved in initiatives around community health in Oliver. The capacity, assets and potential connections, shown on the asset map indicate great potential for action around community health in Oliver! **The Oliver community HAS the capacity to support the health of its citizens!**

OLIVER IS RICH IN RESOURCES TO SUPPORT HEALTH!!!

Thank you for taking the time to complete the Oliver community capacity survey. Thanks to you and many other organizations and individuals in your neighbourhood, we have been able to collect some valuable information about the skills and abilities of the individuals, businesses and associations who reside or operate in Oliver. This very exciting information means OPPORTUNITY for all those who live and work in Oliver!

WHY WAS THE SURVEY COMPLETED?

In an effort to eliminate the deficit, our government has made cuts to health care. This leaves many of us feeling as though we've lost control of our own health. The purpose of this study was to show the Oliver community that it is possible to regain some control of health. The survey results show that the community has many assets that lie within its own boundaries, and we are pleased to make this information available to all the residents and businesses of Oliver.

WHO WAS RESPONSIBLE FOR DOING THIS SURVEY?

This survey was completed by the Oliver Community League, in partnership with the Community Development office of the Caritas Health Group. Yours is the second Edmonton community to take part in this venture, and it is hoped that more communities will come on board. The Caritas Community Development office acts as a community animator, encouraging networking among individuals, businesses, and associations, supporting the creation of new partnerships and opportunities, and building on community strengths.

HOW DOES THIS INFORMATION MEAN OPPORTUNITY?

The information collected during this survey is an inventory of the community's assets. We wanted to show the community what it has to support health. This information could turn ideas into business ventures, as people come together to share their resources. Everyone has special skills and abilities which can be shared. By identifying these resources, we can see many opportunities arise for new business and job opportunities. Our goal has been to provide the community with this information, but its up to YOU to take advantage of it.

WHAT WERE THE RESULTS?

We surveyed 170 households, 97 businesses, and 62 associations in Oliver. The Oliver community businesses, associations and citizens have the capacity to support the health of the community!

Businesses and associations have a great deal to offer. In fact, they had so much to offer and share in support of health and wellbeing that we decided to map it out! The map on the next two pages shows the results. The business and associations of Oliver said they could provide support in many areas. They include --- supports for distinct groups; the disabled, persons with AIDs or HIV positive, seniors, aboriginal people; supports in the medical area, quality of life supports and supports for the basic necessities. The asset map shows the connections. Check it out!!

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OLIVER COMMUNITY HEALTH SUPPORTS ASSET MAP — CONNECTIONS

This Asset Map is a visual description of what the Oliver businesses (60) and the Oliver associations (56) said they have and would be willing to share in support of health in the Oliver community.

The map does not show the geographic location of the businesses and associations.

OLIVER Community League
"A Community With A View"

River Valley Victoria

North Saskatchewan River

March 1995

OLIVER COMMUNITY HEALTH SUPPORTS

RESTAURANTS
GROCERIES
FOOD
CLOTHING
CHILD CARE
EDUCATION
SAFETY
RELIGION AND SPIRITUALITY
EMPLOYMENT AND FINANCIAL SECURITY
QUALITY OF LIFE
SUPPORT FOR BASIC NECESSITIES
DISTRICT GROUPS
ABORIGINAL
PERSONS WITH NDS/HIV
MEDICAL SUPPORTS
HOME CARE
LONG TERM CARE
VOLUNTEERISM
SENIORS
PHARMACIES
SPECIALISTS
OPTOMETRY
DERMATOLOGY
DENTAL
BACK CARE
FERTILITY / NUTRITION
PREGNANCY
COUNSELLING
DRUG AND ALCOHOL ABUSE
STRESS RELIEF
FITNESS & LEISURE
ENVIRONMENT
SPECIAL PRODUCTS
HAIR CARE
FLOWERS
MEDICAL

124 St
104 Ave

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ERIC
Full Text Provided by ERIC

OLIVER

Community League

OLIVER IS RICH IN RESOURCES TO SUPPORT HEALTH!!!

We also found some very exciting results when we surveyed 170 households. Here is a sample of what you said:

In the 170 households that were surveyed the people said that they had, and may be willing to share, the following experiences with their neighbours in Oliver:

- caring for the elderly (76 people)
- caring for the sick (80 people)
- preparing food for numbers over 10 (67 people)
- bulk food purchasing with other people (57 people)
- vehicle maintenance (45 people)
- electrical (36 people)
- plumbing (23 people)
- mechanical (30 people)
- teaching (68 people)
- plus much, much more...

THE NEXT STEP IS UP TO YOU!!

HOW CAN YOU ACCESS THIS INFORMATION?

The Oliver Community League offers easy access to this valuable information. All you have to do is contact the president of the League, Hilda Sucre, at 420-0714. The information is also kept at the Community Development office. Contact Susan Roberts or Angie Dedrick, Community Development, at 484-9045. A full report of this Community Health Capacity Study is available at both of these locations.

IT'S ALL IN OLIVER!

Stratford - Mobilizing the Spirit of Stratford (S1 and S2)

"building capacity to support community health"
Stratford Prince Edward Island

- Took place in four rural communities becoming one in Prince Edward Island (population is approximately 6,000) - three kilometers from the capital city Charlottetown, population 23,000
- Mainly residential, some commercial in farming country

Stratford is full of Resources that Enhance the Spirit of our Town!

Thank you for taking the time to enhance the Spirit of Stratford by filling out our community capacity survey.

May 1996

Thanks to you and many others in Stratford, we have been able to gather valuable information about the skills and abilities of the people, organizations, and businesses in Stratford that can be shared with our community. We have also integrated with, and had an impact on, our new Town's Planning process. This means that our "Spirit"-- or both the gifts and capacities we share, and the vision we have about healthy community, will be reflected in our new Stratford Town Plan.

Why was the Capacity Study completed?

There have been many changes in our community. Both changes in our views of about our health and municipal amalgamation have had an impact in our Town. Even though Stratford is a new town, there is a rich history and "spirit" that sets it apart. We decided to find out how to enhance that "spirit," look at its impact on our wellness, and share it with others in our community.

"Through our Community Resource Committee, Stratford has the capacity to connect its resources to Enhance the Spirit of our community."
-- Mike Farmer, Stratford Mayor

Who was responsible for conducting this survey?

For the survey, a Community Resource Committee made up of volunteers was formed. A partnership between the Town of Stratford and Queens Region, Health and Community Services was developed to complete a community resources mapping exercise. With it, we were able to identify resources to strengthen and support the physical, emotional, spiritual and environmental health of the community.

It's All Here! It's All Here! It's All Here! It's All Here!

For more information on the Stratford Community Resource Committee and the Capacity Building Project, contact a member of the Community Resource Committee. A full report will be made available in September 1996.

Asset Map
Enhancing the Spirit of Stratford!

This map visually represents the connections between businesses, organizations, and individuals who responded to our survey.

The Stratford border is framed with the words that describe the visions of a "healthy community" held by some of your neighbours. Look at the spirit represented here! If you are interested in contributing to our map, and enhancing our spirit, call Pat Malone at 569-1870.

Note: The businesses and associations listed on the map are only those who responded to our survey. We are confident that many more will emerge!

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What were the results?

Prior to April 30th, 133 individuals, 19 businesses, and 12 organizations were surveyed and more are taking part every day. 59 percent of individuals, 75 percent of organizations, and 89 percent of businesses have indicated they may be interested in becoming involved in initiatives that might emerge from this survey, and have demonstrated their spirit through offering supports, skills and abilities to share with the Stratford community.

Businesses and associations have a great deal to offer in "enhancing the spirit" of our community. We decided to map them out so you can see! On the inside of this report is an Asset Map which shows the results. The capacities, assets, and potential connections shown on the Asset Map indicate the great potential we have to "enhance the Spirit of Stratford."

The individual surveys also revealed some exciting results. For example, the 133 residents surveyed said they had, and may be willing to share the following with their neighbours in Stratford.

- Experience working with youth .... 84 people
- Experience working with Seniors............ 65 people
- A supportive neighbourhood network .... 49 people
- Providing transportation .... 85 people
- Buying bulk food .... 28 people
- Providing entertainment .... 32 people
- Office skills .... 84 people
- And much, much more!!!
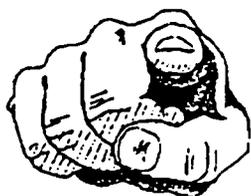
The next step is up to YOU!

Contact Pat Malone at 569-1870 to find out further information about "Enhancing the Spirit of Stratford."

COMMUNITY RESOURCE COMMITTEE MEMBERS

Kay Ross
Dunstan MacDonald
Don Livingstone
Rosemary Faulkner
Brenda MacDonald
Roma MacQuarrie
Pam Balderston
Erin McCrady
Velda Nicholson
Harry Simmonds
Anne MacDonald
Heather Carver
Tamara Casebolt
Kay Rowe
Steve McQuaid
Susan Howard
Phil Wood

Whitecourt and Community Capacity Study (W1 and W2)

Discovering the S.P.I.C.E. of Whitecourt" - Whitecourt Alberta

- Rural Alberta town of 7,200 population
- The industry is oil and gas, and wood products
- Very young population

"Discovering the S.P.I.C.E. of Whitecourt!!"

Who is the Whitecourt and Community Capacity Study Team??

We are a group of interested community citizens who gathered to take a look at the Whitecourt community in a different way. Our group began with a large number of citizens who came together to chat and plan for discovering what was great about Whitecourt. There was a smaller core group of dedicated Team members who continued working on the project, and many others who supported it.

> "A great way for me to meet people and make connections in the community"

Looking at Whitecourt in a Different Way

We decided to celebrate all that is great about Whitecourt and discover what is here to enhance the Spiritual, Physical, Intellectual, Creative and Emotional aspects of life.

> "It is nice to talk about the good things in the community - a refreshing change!"

What Did We Discover??

It was fun to talk and share with 68 Associations, 76 Businesses and 149 Individual Citizens in Whitecourt and the surrounding area. The Whitecourt Associations, Businesses and Citizens that we talked to agreed that the people and the friendliness of the community was what is best about Whitecourt. Many loved the numerous recreational activities and opportunities for community involvement. For others, it was the small town atmosphere and the proximity to nature and the wilderness which was great. Whatever way we look at it, Whitecourt is a great place to live!!

The Associations and Businesses in Whitecourt we spoke with already contribute a lot, and many had great ideas on how they could do more in the future! The Asset Map on the other side of the page shows what they already do, and what more they could do, to enhance the S.P.I.C.E. of life in Whitecourt!

An amazing 115 of the 149 citizens we spoke with were willing to share some of their wide variety of talents and skills with the community! As you would expect, the large majority of these citizens had skills and experience in family and home life activities such as caring for children, house cleaning, driving a car and grocery shopping! We talked with 17 citizens who have skills in sign language, and 44 citizens mentioned that they dabble in specialty cooking such as Chinese food, Ukrainian & Italian foods, gourmet, Greek and German foods. One person specializes in screaming hot chicken wings! We have more than 79 writers who spoke with us and 66 citizens who speak a language other than English such as French, Ukrainian, Greek and Spanish. Many citizens we spoke with are talented in trades such as construction (62), automotive (48), plumbing (39) and electrical (39). And so much more.....!!

> "I learned that I enjoy meeting people and helping them connect with others who have similar interests!"

What is the Next Step??

We are very excited about all that we have discovered so far! We already have plans underway to keep gathering more information and to make all of it readily accessible to the whole community. We have a few great ideas of how this information could be used, and we would like to hear yours! This is not the end, it is just the beginning!!

☎If you, or your Association or Business have not talked to the Team yet, or if you would like more information or a copy of the full report, *please call:*

Heidy Steinback 778-5217 or Tina Schryvershof 778-5754 before 9pm

☞Check out the Asset Map on the back!!

"Discovering the S.P.I.C.E. of Whitecourt!!"

Spiritual,
Physical,
Intellectual,
—Creative and Emotional

MARCH, 1996

Note: This map does not represent the community geographically, it shows how the Businesses and Associations may be linked according to their responses to the Capacity Study. Many are involved in even more activities than what we could show here!
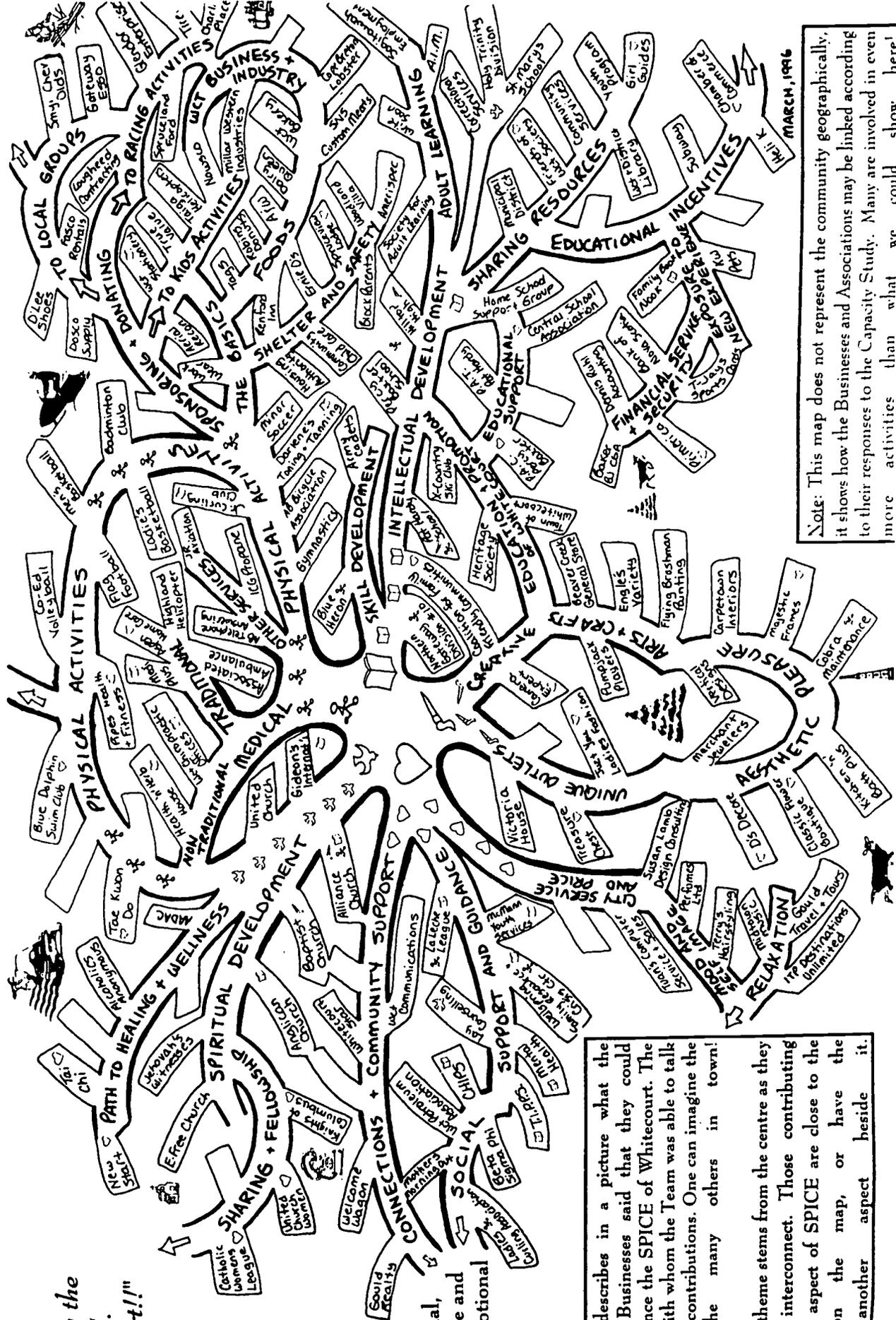
This asset map describes in a picture what the Associations and Businesses said that they could contribute to enhance the SPICE of Whitecourt. The map shows those with whom the Team was able to talk and their fantastic contributions. One can imagine the potential of the many others in town!

Follow the 5 main theme stems from the centre as they branch out and interconnect. Those contributing to more than one aspect of SPICE are close to the other aspect on the map, or have the symbol for another aspect beside it.

Appendix F:

"COMMUNITY BUILDING RESOURCES"

COMMUNITY BUILDING RESOURCES ☾
Susan Roberts - M.Ed. RDN B.Sc.

WHAT is COMMUNITY BUILDING RESOURCES ?

It is a small business led by Susan Roberts, an experienced asset-focused community developer and adult educator. Susan and her associates spend time with citizens and their communities, groups, businesses and associations, as they develop relationships through their personal discovery of each others gifts and assets, and through the determination of the best use of these resources and assets to:

✿   create a picture of, and a path to the future

✿   develop strong communities through strong citizen relationships and friendships

✿   stimulate community social and economic growth

✿   create supportive community centred and community managed infrastructures

HOW can COMMUNITY BUILDING RESOURCES work for you?

By effectively utilizing, with community citizens, any of the following➜

✿   Community Capacity Building and Asset Mapping©

✿   Participatory facilitation

✿   Graphic Visioning and strategy setting

✿   Workshop development and delivery

✿   Community and citizen conversations for action

✿   The asset- based community and citizen capacity discovery and development

✿   Effective group process

✿   Existing needs statistics and data and gap analysis

✿   Evaluation

✿   Adult education techniques and theory

✿   Nutrition/food information and education

WHO is the owner of COMMUNITY BUILDING RESOURCES?

Susan Roberts, owner, is a dedicated professional, who believes and is committed to the development of vital communities through potentiating the undeveloped and undiscovered relationships and capacities of communities, citizens and professionals. Susan has a broad based experiential and theoretical background in community building, community economic development, adult education and health acquired in the Canadian maritimes, northern and western Canada and the central USA.

Chat with Susan about getting together with COMMUNITY BUILDING RESOURCES to discover, connect, create, and relate, to make things happen within your community, club, church, office, department or corporation!!.... You will find and discover things you would never imagine!

COMMUNITY BUILDING RESOURCES   ☾
#10- 51330 Range Road Spruce Grove, AB T7Y 1H1
(403) 987-2002 eve. (403) 484-9045 day   Fax: (403) 484-9099
email: sroberts@cha.ab.ca

COMMUNITY BUILDING RESOURCES

Try it! It works!

_____

Susan Roberts M.Ed. RDN B.Sc.
#10 - 51330 Range Road 271
Spruce Grove Alberta
T7Y 1H1

(403) 484-9045 day   (403) 987-2002 eve
Fax: (403) 484-9099 Email: sroberts@cha.ab.ca

Appendix G:

Community Capacity Building
and Asset Mapping© Workshop

"Community Capacities Building & Asset Mapping©" Workshop
A Teletic Approach - where anything goes

(stamp: FRIENDS SHARE · CONNECT POTENTIAL)
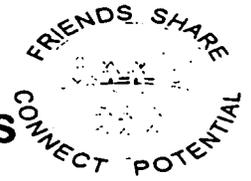
Community Development - (MAGJS) & Community Building Resources

c/o Jasper Place High School   Phone: (403) 484-9045
#681 8950 - 163 Street   Fax: (403) 484-9099
Edmonton, Alberta   T5R 2P2 - Canada
E-mail: cdoffice@cha.ab.ca
WWW Site: http:/www.cha..ab.ca/commdev

10 - 51330 Range Road 271
Spruce Grove, Alberta   T7Y 1H1
Phone: (403) 484-9045 Or (403) 987-2002
Fax: (403) 484-9099
e-mail: sroberts@cha.ab.ca

August, 1997

We all want to see our community as a place where people are happy and healthy. Everyone can make this happen! This workshop will show you a path that you probably have not tried, one that opens doors to new opportunities and new friends. There is nothing magical in the workshop, but you may be surprised - your thinking may change, paths and solutions may be found in unusual places - at your own doorstep, in your backyard, under your nose, or even in your own shoes!!! The workshop shows you a versatile and flexible path where you can begin your journey toward a shared vision of your community by focussing on the assets and gifts of the community and its citizens, and finding ways to mobilize these.

The **"Community Capacity Building and Asset Mapping©"** workshop is on two consecutive days, or 2 days spread out over time.

➢ **DAY ONE** workshop must be completed before the Day Two workshop.

➢ **DAY TWO** of the workshop is intended for those participants who are planning to actualize The Steps to Capacity Success © from the Community Capacity Building and Asset Mapping© model.

DAY ONE
WHAT CAN WE DO AND WHERE DO WE START?

includes .....

- *Community Capacity Building and Asset Mapping©*
  philosophy.

- *Assets!! - what are they? where are they?*

- *Community - what do you mean? - what do I mean?*

- *Community Groups and Sectors.*

- *Overview of Community Capacity Building and Asset*
  Mapping© and of the Steps to Capacity Success© and the
  NEXT STEP(S).

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DAY TWO
MAKING IT HAPPEN!!

includes ....

- *The Steps to Capacity Success©, including Asset Mapping.*

- *Learn it!! and Try it!! Flush out your own and your group's ideas for Community Capacity Building and Asset Mapping©.*

- *Now do it!!*

This day is most useful for those who have decided to community build using the "asset focus" - Community Capacity Building and Asset Mapping©/Steps to Capacity Success©.

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This 2-day workshop will be of most value to groups of citizens. It guides the group in understanding the Asset-Based Community Building thinking (day 1) and in constructing a plan together (day 2). Learning, team building, and planning are all part of the workshop. An adaptation of this workshop is available to service providers, who wish to more fully understand the practise of Asset-Based Community Development, and Community Building and who can see their roles changing to being navigators of change, and facilitators and "sparks" for Community Building. Each workshop is planned to fit the community context through discussions with the community before the workshop is held.

▸ The maximum number of participants for a workshop is 20.

▸ To register or for more information phone, write, fax or e-mail: Susan Roberts or Angie Deddick, Community Development office.

▸ The workshop team is very willing to travel to communities to deliver the workshop.
The next workshops offered
➤ Possible locations: Nova Scotia. Canada
Edmonton, Alberta - Canada

▸ **COST:** 100.00/day or **$150.00 for both days, per participant (Canadian).**
The price is negotiable.

Please Pass On To Others - Thanks

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Appendix H:
Interview Questionnaire

Interview Questionnaire - Questions for our Community Friends
Community Development, CHA - Spring 1997

Over the past 3 years, we have had the opportunity to work with many wonderful groups and people who have made a real difference in their communities. You are certainly one of those people, and we have learned a great deal through you. To build on this learning, we are talking to our community friends to gain an understanding of what has been working, and what has not been working. The results will be useful to other community groups and citizens, and will help us strengthen our practice.

We will be sharing our learning through a presentation at the Community Development Society conference in July.

The following questions refer specifically to the ___(name of community or group)___ Capacity Study and what has transpired since.

Community:

Name: Date:

Address: Postal Code:

Phone: Fax:

Interviewer: Recorder:

---

1. If you think back to when your community group first began looking at its strengths and assets...

   a) how did it start? *(i.e. did you contact us, did we contact you, did you already have an idea of what you wanted to do? Etc.)*

   b) when did it start?

2. What were the ways or steps that you used to discover your community's strengths and get people involved in what you were doing?

3. I would like to review the process that was followed in your Capacity Study, as we recall them, so you can confirm it and add any further information you might have. Any insight you have about what worked, and/or what did not work, in relation to these 6 steps, would be helpful. *(Verbally review the 'Community Building Variable Matrix' and add their additions, deletions and comments)*

   (a) For each step, ask "Was this useful?" Yes/No_____

   "Why?"

   (b) For each "C", ask "Who was involved from your community? *(just one person, more than one)*

   **Note: responses recorded on CB Variable Matrix

4. a) What has been happening in your community since the Capacity Study was completed, that you feel may be related to the Capacity Study? *(significant events, stand-outs)*

   b) When did these events occur?

5. We have a kept a list of activities that we recall happening after the completion of the Capacity Study. Could you confirm them with us.

6. How did these activities get started?

7. How were these activities kept going, if at all? *(i.e. factors, things, people)*

8.   (a) What role did the Capacity Study play, if any, in getting these initiatives started?

      (b) What role did the Capacity Study play in maintaining these initiatives? *(Did they make connections with people who eventually got involved? was the information from the study used?)*

9. When you think about these community building activities

      (a)Who would you say played strong roles in your community building activities? *(i.e. individuals or groups, yourself, community members or a service provider/paid person)*

      (b) Please describe what they did.

10. Have any of the activities or initiatives that we've talked about so far required funding? Yes/No_____

    If yes:
    (a) when was it received?

    (b) who was the funder?

11. How did the funding or lack of funding make a difference, if any? *(i.e. a help or a hindrance?)*

12. Do you have any other comments?

13. Is there anyone else in your community with whom we should talk?

Thanks for taking the time to chat with us. We will sending you a summary of our learning!

Appendix I:

Interview Questionnaire Rationale

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Interview Questionnaire - Questions for our Community Friends
Community Development, CHA - Spring 1997

-- INTERVIEWER QUESTIONNAIRE RATIONALE --

Over the past 3 years, we have had the opportunity to work with many wonderful groups and people who have made a real difference in their communities. You are certainly one of those people, and we have learned a great deal through you. To build on this learning, we are talking to our community friends to gain an understanding of what has been working, and what has not been working. The results will be useful to other community groups and citizens, and will help us strengthen our practice.

We will be sharing our learning through a presentation at the Community Development Society conference in July.

The following questions refer specifically to the __(name of community or group)__ Capacity Study and what has transpired since.

Community:

Name: Date:

Address: Postal Code:

Phone: Fax:

Interviewer: Recorder:

Answers CDS Question #1: How and where did the initiative start in the community?

1. If you think back to when your community group first began looking at its strengths and assets...

    a) how did it start? *(i.e. did you contact us, did we contact you, did you already have an idea of what you wanted to do? Etc.)*

    b) when did it start?

Answers CDS Question #2: What were the common elements used to **find** and mobilize the assets?

2. What were the ways or steps that you used to discover your community's strengths and get people involved in what you were doing?

Answers CDS Question #2: What were the common elements used to **find** and mobilize the assets?

3. I would like to review the process that was followed in your Capacity Study, as we recall them, so you can confirm it and add any further information you might have. Any insight you have about what worked, and/or what did not work, in relation to these 6 steps, would be helpful. *(Verbally review the 'Community Building Variable Matrix' and add their additions, deletions and comments)*

    (a) For each step, ask "Was this useful?" Yes/No_____
    "Why?"

    (b) For each "C", ask "Who was involved from your community? *(just one person, more than one)*

    **Note: responses recorded on CB Variable Matrix

Answers CDS Question #2: What were the common elements used to find and **mobilize** the assets?

4. a) What has been happening in your community since the Capacity Study was completed, that you feel may be related to the Capacity Study? *(significant events, stand-outs)*

    b) When did these events occur?

5. We have a kept a list of activities that we recall happening after the completion of the Capacity Study. Could you confirm them with us.

Answers CDS Question #2: What were the common elements used to find and **mobilize** the assets?

6. How did these activities get started?

Answers CDS Question #3:What determined the sustainability of community building over time (1-3 yrs)?

7. How were these activities kept going, if at all? *(i.e. factors, things, people)*

Answers CDS Question #2: What were the common elements used to find and mobilize the assets?

8.   (a) What role did the Capacity Study play, if any, in getting these initiatives started?

Answers CDS Question #3: What determined the sustainability of community building over time (1-3 yrs)?

(b) What role did the Capacity Study play in maintaining these initiatives? *(Did they make connections with people who eventually got involved? was the information from the study used?)*

Answers CDS Question #4: Was there a role for a service provider and/or a community builder? What was the role?

9. When you think about these community building activities

(a)Who would you say played strong roles in your community building activities? *(i.e. individuals or groups, yourself, community members or a service provider/paid person)*

(b) Please describe what they did.

Answers CDS Question #5: Did any elements of the community building require funding, and if so, when was it received and who was the funder?

10. Have any of the activities or initiatives that we've talked about so far required funding? Yes/No_____
    If yes:
    (a) when was it received?

    (b) who was the funder?

Answers CDS Question #5: Did any elements of the community building require funding, and if so, when was it received and who was the funder?

11. How did the funding or lack of funding make a difference, if any? *(i.e. a help or a hindrance?)*

NO CDS QUESTION ANSWERED

12. Do you have any other comments?

13. Is there anyone else in your community with whom we should talk?

Thanks for taking the time to chat with us.
We will sending you a summary of our learning!

WORD\C:DOCS\CDSQUE.DOC

Appendix J:

Community Building Matrix

Community Building Variable Matrix

STEPS TO SUCCESS	Glenwood (Sept. '94)	Food Security (Oct. '94)	Oliver (Mar. '95)	Millhurst (May '95)	Whitecourt (Apr. '96)	Children's Services (Apr. '96)	Stratford
Define Question							
participate in a BOC Workshop	CD	C	CD & C	CD & C	C	C	C
	-N/A	-N/A	-N/A	-N/A	CD & C -many attended this workshop to begin to plan. They came up with the theme and a question.	C -many attended this workshop to begin to plan. They came up with the theme and a question.	C & CD -many attended this workshop to begin to plan. They came up with the theme and a question.
Initiate							
establish key community contacts	CD -EFCL and CL President -tools included phone calls and flyers	CD & C	CD & C -EFCL and CL President	CD -EFCL and CL President	CD -one month was spent meeting and chatting with citizens.	C	CD -this is how the Community Resource Committee was formed
refine question		CD & C		CD & C	C	C	C

Note:
- All information included in this table has been been taken from written accounts, including report and appendices. The only exception is Stratford, where a working group member was interviewed in addition to use of the written account.
- 'CD' refers to the Community Development office, students/researchers working with the Community Development office, or other Community Building facilitators.
- 'C' refers to the Community group

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STEPS TO SUCCESS (cont'd)	Glenwood	Food Security	Oliver	Millhurst	Whitecourt	Children's Services	Stratford
conduct a walkabout and gather information for a community profile	CD	CD	CD	CD	CD -Used Community Resource Booklet and Business Directory.	C	C
make use of existing research resources	CD -City of Edmonton Neighbourhood Fact Sheets and Profiles	CD & C	CD -City of Edmonton Neighbourhood Fact Sheets and Profiles	CD -City of Edmonton Neighbourhood Fact Sheets and Profiles	CD -Library, Community Services, Interagency, Community Resource Booklet, Adult Literacy Group Db, Business Directory, Baptist Church.	C -City of Edmonton Neighbourhood Fact Sheets and Profiles	C -Provincial Voters List
confirm geographic boundaries	CD -community defined	C	CD -community defined	CD -community defined	CD & C	C	CD -Town Planning

Note:

- All information included in this table has been taken from written accounts, including report and appendices. The only exception is Stratford, where a working group member was interviewed in addition to use of the written account.

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	Glenwood	Food Security	Oliver	Millhurst	Whitecourt	Children's Services	Stratford
inform community members (i.e. newsletter, media)	CD -Information Meeting -CL Exec. meeting. (Gary did) - they were different than CD thought -EFCL boundaries	CD & C -letter to CL members -Notices in apartments -letter to EGH employees -info shared at board mtg	-EFCL boundaries	CD -letter to GN staff -status reports to CL exec. -EFCL boundaries	C -word of mouth, local paper, City Council, Interagency, Children's Services and Team notes. -EFCL boundaries	C -in some but not all of the four communities	C -word of mouth -notice in Town Newsletter
develop goals and objectives	CD	CD & C	CD & C	CD & C	C	C	CD &C
STEPS TO SUCCESS (cont'd)	Glenwood	Food Security	Oliver	Millhurst	Whitecourt	Children's Services	Stratford
Design Questionnaire and Database							
design questionnaires for individuals and businesses/associations	CD & C -reviewed with community	CD & C	CD & C -adapted from Glenwood's	CD & C	C	C	C

Note:

- All information included in this table has been taken from written accounts, including report and appendices. The only exception is Stratford, where a working group member was interviewed in addition to use of the written account.
- 'CD' refers to the Community Development office, students/researchers working with the Community Development office, or other Community Building facilitators.
- 'C' refers to the Community group

			questionnar. Added a few of their own				
match questionnaire to database	CD	CD	CD	CD	CD	C	C
set up a separate database for each questionnaire	CD		CD	CD	CD	CD	C
Conduct the survey							
develop a list of all businesses and associations	CD	CD & C	CD & C	CD & C	C	C	C & CD -Stratford Business Association List and Town Planning.
develop a paper description	CD -used in the newsletter -gave to respondents	CD	CD & C	CD & C	CD & C	C	C
develop an interviewing plan	CD & C -CL	CD	CD & C	CD	CD & C		C

Note:

- All information included in this table has been taken from written accounts, including report and appendices. The only exception is Stratford, where a working group member was interviewed in addition to use of the written account.

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- 'C' refers to the Community group

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	Glenwood	Food Security	Oliver	Millhurst	Whitecourt	Children's Services	Stratford
conduct volunteer training sessions	CD supplied membership list.		CD & C	CD	C -developed a team training package.	C	C
STEPS TO SUCCESS (cont'd)							
conduct questionnaire with project partners	CD (Gary gave us G'wood membership list)	CD	CD & C	CD	C	C	C
connect with and interview key community people	CD		CD & C -Condos, apts. and EGH employees		CD & C		C
conduct questionnaire with the owner or manager	CD	CD	CD & C	CD	CD & C	C	C
expand list of businesses and organizations		CD -used a referral question	CD & C	CD	C	C	
conduct questionnaire in person	CD -also by	CD -mostly by	CD & C -also by	CD -business in	CD & C -blitz's, IGA	C	C

Note:

- All information included in this table has been taken from written accounts, including report and appendices. The only exception is Stratford, where a working group member was interviewed in addition to use of the written account.
- 'CD' refers to the Community Development office, students/researchers working with the Community Development office, or other Community Building facilitators.
- 'C' refers to the Community group

	phone, and drop-off	phone	phone, and drop-off	person-citizens in person by blitz or community meeting	table, Pumpjack Players, Adult Literacy class, and gymnastics class.		C -i.e. Meals on Wheels
make the information sharing mutual					C	C	C

Note:

- All information included in this table has been taken from written accounts, including report and appendices. The only exception is Stratford, where a working group member was interviewed in addition to use of the written account.

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- 'C' refers to the Community group

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STEPS TO SUCCESS (cont'd)	Glenwood	Food Security	Oliver	Millhurst	Whitecourt	Children's Services	Stratford
Putting in all Together							
create an Asset Map	CD	CD	CD & C	CD	C		C
describe efforts in a written account	CD	CD	CD & C	CD	CD & C	C	CD & C
Communicate							
develop a summary and send to all respondents	CD	CD	CD & C	CD	CD & C	C	CD & C -sent to all who responded.
present copies of final report to all key parties	CD & C -Gary presented to CL Exec.	CD -made available to those interested	CD & C -CL supplied names for who should receive full report.	CD	CD & C	C	C -presented to QRHA, Town Council, and many others.
communicate the results with groups inside and outside the community/ies	CD	CD -summary sent core group plus all respondents	CD & C		CD & C -local paper	C	C -Health Fair
keep a record of who has received the	CD	CD	CD	CD	C		

Note:

- All information included in this table has been taken from written accounts, including report and appendices. The only exception is Stratford, where a working group member was interviewed in addition to use of the written account.

- 'CD' refers to the Community Development office, students/researchers working with the Community Development office. or other Community Building facilitators.

- 'C' refers to the Community group

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written account and summaries.				-on database	

Note:

- All information included in this table has been taken from written accounts, including report and appendices. The only exception is Stratford, where a working group member was interviewed in addition to use of the written account.

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- 'C' refers to the Community group

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Appendix K:

"Next Step" Data

<div align="center">

CB Variable - Next Steps

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Glenwood

Date Capacity Study Summaries sent out: September, 1994

November, 1994 - Rochelle Heidt, Thorncliffe School Community Coordinator requests a
nutrition educator for their Education week, November 14 - 18.
Carmen Evanson, an ERDI student, with Susan Roberts as facilitator, develops a
curriculum and presents to students at Thorncliffe School during their Education Week,
November 14 - 18

February 9/95 - Glenwood Community Meeting
- in preparation for this meeting, a separate "Yes" Script was prepared for both
  businesses/associations and citizens. All businesses/associations and citizens
  who had indicated on their survey that they would be interested in being
  involved as Glenwood developed a plan for community health, were called and
  invited to a gathering on Feb. 9/95 at the Glenwood Community Hall.
- Eighteen people attended the gathering. There was some excellent discussion
  and many ideas and suggestions, but no concrete actions were taken.
- Notes from the meeting were prepared and sent to all those who attended, as
  well as those who had expressed interest in attending but could not clear their
  schedules. 'Next Step?? Comments?? Actions?? and Feedback?? were
  encouraged, but no calls were received by either Gary Racich or the CD office.

March 1995 to August 1995
- Eleven groups requested a copy of the report and/or   summary. Further
  requests were not recorded after August.

September '95 to March '96
- Glenwood has been connected to other West End community groups and
  organizations, including West End Community Unity (WECU), West
  Edmonton Business Association (WEBA), and West End Working Group on
  Children's Services.
- Two members of the Community, Jenny Racich and Sue, attended a "Building
  on Capacities Workshop" put on by the CD office on Sept. 28/95.
- Gary has accepted a person to work off their community hours at the hall.
- Gary has provided comments and suggestions on various CD office and health
  related initiatives. He also made inquiries with regards to the amount that
  Glenwood citizens use the Misericordia emergency - unfortunately this
  information was not obtainable.
- Carol Vander Well, one of the citizens who attended the February 9th meeting,
  connected to the Misericordia Community Health Centre for information re:
  Health Reform. Ellen Pekeles, Site Administrator, presented to the Edmonton
  Osteoporosis Support Group.

- Carol also agreed to assist the Capital Health Authority as they developed a plan for the development of Community Health Councils.

November 1995 - Ontario Healthier Communities Coalition requests the Glenwood report and summary.
February 1996 - The Toppinish Hospital in Providence and D. Bell, request the Glenwood report.

March 7, 1996 - Glenwood Annual General Meeting

- The Glenwood Community League and the CD office agreed to work together to take the Next Step after the Glenwood Capacity Study. They planned to talk to Glenwood citizens, businesses and associations to rediscover and then connect the many resources and assets that emerged from the Glenwood Capacity Study. The focus would be increasing and supporting local economic activity.
- the CD office was invited to present this information at the AGM. The Glenwood Community Neighbourhood News contained information about this presentation.
- There were about 20 people in attendance at the meeting, and all seemed very receptive to the initiative. Many saw crime and Stony Plain Road as part of the initiative as well. Several people expressed interest in being involved.

March '96 - September '96 - Glenwood Guide

- *March 12, 1996* - a student working with the CD office, Colleen Enns, organized the first meeting regarding Glenwood's Next Step. To do this, she reviewed the questionnaires that had been completed during the Capacity Study and highlighted businesses, associations and citizens who had positively responded and/or expressed interest in being involved. These people were then called using a script prepared by Colleen and Gary, and invited to attend a gathering on March 25th.
- *March 25, 1996* - Glenwood: The Community is Talking Gathering. Eighteen people attended this gathering, including citizens, business owners, and associations. The group spent time getting to know one another, reviewing the Glenwood Capacity Study, and then brainstorming about initiatives that Glenwood could carry out. There were many excellent ideas, and a great deal of enthusiasm. The main themes that emerged included: Glenwood businesses working with the community, Stony Plain Road and crime.
- The group agreed to meet again on April 22. In preparation for this meeting, an advertisement was sent to ITV, and posters were prepared and distributed throughout Glenwood. In addition, people who had expressed interest in attending the March 25th meeting but could not arrange the time, were called and invited to the April 22nd meeting.

- Colleen also investigated the idea of a guide or directory, Neighbourhood Watch, past Community directories, and began inquiring about how to access historical information.

April 22 - Glenwood: The Community is Talking Gathering.

- Fourteen people attended this very productive meeting. The gathering began with introductions and historical sharing. The group then reviewed the ideas generated at the last gathering. There was strong consensus to the idea of developing a Business and Services Directory that would promote economic sustainability and pride in Glenwood. The Guide would encourage citizens to shop locally through the use of business discounts and incentives. It would also provide information about the history of Glenwood.
- the group was very keen to begin immediately, and three sub-committees were struck: Funding, Directory Set-up, and History. The goal for completion of the guide was Sept. 1, 1996.
- *September 1996* - **the Glenwood Guide was successfully completed.** The guide included a completed listing of all businesses and services in Glenwood, several stories about Glenwood's history written by local historian, sketches and a mascot (Glen Woodie) from a local artist, Earl's Cooking tips, Toxics Watch tips, and information about the Community League.
- the Guide was distributed to all residents and businesses in Glenwood.
- Funding for this project came from Health and Environment Canada's Community Animation Project.
- the success of the Glenwood Guide will be evaluated in the spring of 1997.

September 1996- Angie contacts Mitch Miyagawa of the Toxics Watch Society to ask him to help the Guide group conduct an environmental audit.

October 1996

- Elaine Walsh of the Scarborough Grace Hospital in Ontario, requests the Glenwood Report.
- Guide group meets to brainstorm ideas for Environmental Audit. They plan to create a registry of positive environmental actions and to solicit ideas for environmental projects from Glenwood residents.
- Article for Environmental Audit appears in Glenwood newsletter.

October 21- Mitch presents to the Neighbourhood Watch group.

November 5 1996- Guide group meets again to brainstorm.

January 1997- Eveline, Gary, Mitch, and Angie meet. They decide to do a "Neighbourhood Waste Study". Angie contacts Marleen Kankkunen to inquire about getting her class at Westlawn to help.

March 1997- "Glenwood Garbologists"

- *March 6-13-* Mitch works with the grade 8 Community Leadership class at Westlawn Junior High to do a Neighbourhood Waste Study. The class appears on L & J News on March 13.
- *March 27-* Final Report submitted to CAP.

May 1997 - EFCL Reports info regarding Glenwood in their "The Federation Forum", the article is directly quoted from the Community Development CHA Newsletter "Anything Goes" (Issue 5 - Spring 1997)

Oliver

Capacity Study Summaries sent out March 1995. Feedback included:
- *March 13, '95* - Virginia Rosebaum - 488-3389 - she is a retired RN and is keen to be involved.
- March 20, '95-Interfaith Association on AIDS - Heather called with new address and info re: changed address. She loved the map, and wants to be included in any subsequent meetings.
- *March 24, '95* -AADAC- called to inquire about boundaries. Liked the map!
- *February '96* - Friendship Centre - Melonee - Metis Women

March 1995 - November 1995 - Forty-four groups requested and received the Oliver Report and/or summary. Requests after November 1995 were not recorded.

May 9, 1995 - As a result of the Capacity Study a new position was created within the Oliver Community League Executive, Community Outreach Coordinator. The position was introduced at the April 24th AGM. No one volunteered for the position at the time, but several interested people emerged after the meeting. The hope was that the person filling this position would carry on with the connections made during the Capacity Study. **-The Community Outreach Coordinator role has still not been defined. The Community League was going to set up a Resource Centre, but had to do booklet first. The thought is still there however.**

May 25, 1995
- Hilda Sucre, president of the Oliver Community League, held a meeting to further discuss the results of the Oliver Capacity Study and to see if anyone is interested in filling the position of Community Outreach Coordinator. Five people attended the meeting, including: Joan Hancock (Dynamic Quality Health Care), Heather (Aids Interfaith Assoc.), Argia (Foot Care), Michael McCarthy, and Hilda.
- Joan Hancock, a private business owner in the neighbourhood volunteered for the position.
- The group brainstormed about how the connections made during the capacity study could be followed up on, and how further connections could be facilitated. The group thought they might produce a directory of all he businesses and associations in Oliver, including names, addresses, phone numbers, contact persons, and purpose of organizations. They may sell these booklets or get donations from local businesses.
- Hilda made a request to Johanna (CD office) to assist in putting this directory together.

June 14, 1995 - Oliver Community Outreach Meeting
- Only two people attended this meeting, Hilda Sucre and Angie Dedrick (CD office). Johanna had prepared a draft of the information requested for the resource booklet. Hilda reviewed the information.

- Hilda had been discussing the idea of a resource booklet with the Community Outreach group and the Community League Executive, and a decision was made to go ahead with the booklet, because they felt it would help businesses and associations of Oliver become connected.
- It was decided that Johanna would prepare the booklet, and the Community League would take care of photocopying. Costs will be recovered through sales of the booklet.

July 1995 - Information received re: The Community Animation Project (CAP) funding through Health and Environment Canada.

September 29, 1995 - Oliver partners with Imagination Market and Community Development Caritas, and submits a proposal for CAP funding. The proposal is to develop and distribute a resource booklet containing information gathered by the Oliver Community League through the Oliver Community Capacity Study. The project would aim to draw linkages between the citizens, businesses, and associations around the environmental issue of recycling. After submitting supplemental information, the group was successful, and received $3000.
-Imagination Market wanted to find more business to donate scrap supplies.

November 1995 - The Ontario Healthier Community Coalition requests the Oliver report.

January 20, 1996 -
- Oliver Community League P.A.T.H. Fourteen Oliver residents and Community League members spent the day creating a dream for the Oliver community, and planning the steps to get there.
- one of the many plans developed and discussed during this session was that of the Resource Booklet. The group decided to meet as soon as possible to get started with the project, and set a meeting for January 22.
- **Found new volunteers for booklet.**

January 22, 1996 - Oliver CAP Meeting
- this meeting was held to discuss the Oliver Resource Booklet and make plans to get the project under way. Two new Community League members joined this group after attending the P.A.T.H.
- students from Susan's NUFS 477 class would be assisting with the project. By March 15th, they would revisit those organizations that had responded positively to the Oliver Capacity Study, develop an accessible resource base and asset map, determine whether the organizations are willing to provide industrial scrap to Imagination Market, develop and nurture linkages among community members an organizations, and raise awareness of the Oliver Community League. **They also got permission to publish their names in the resource booklet.**

November 1996 - The Oliver Report and Summary is requested from the NE Community Health Centre in Spokane, WA, and the Lakeland Health Authority.

February 10, 1996 - CAP Grant (Resource Book) Meeting
-March 1996 - Requests for the Oliver report and summary from Carmen McKell (Community Health Centre, NB), Cheryle Arnott (Scarborough, ON), and Bonnie Brown (Davidson, NC).

Summer 1996 - Oliver Community Resource Access Book complete **and it was distributed in November and December 1996**.

October 1996 - Elaine Walsh, Scarborough Grace Hospital, request the Oliver report.

March 1997 - Debra Jacobson (Baltimore, MD), Juanita Hogg-Devine (Scarborough, ON) and Linda Kjerland (Eagan, MN) request the Oliver report.

April 1997 - The North Central Health District of Melfort, SK requests the Oliver summary.

May 13, 1997 - Hilda faxed the CD office an article from the Edmonton Journal that referred to ABCD and the 1997 Robary Urban Hope Conference

Millhurst

May 1995 - Capacity Study Summary sent out

June 20, 1995 - Rene Mauthe (reporter for Edmonton Examiner) called to inquire. A copy of the Millhurst Capacity Study Summary and the Executive Summary from the Millhurst report. As well, a summary of the Oliver Capacity Study. She called on June 27th, and chatted with Susan.

June 24, 1995
- Corky Meyer is no longer on the Community League executive. She shared that the new president is looking into using the information from the Capacity Study, but suggested that the database not be given to them.
- the Program and Membership Director, Pat, has not been able to connect with Louis Castro to ask him to join the board. The new president has someone else in mind for the multicultural position.
- Corky is on the Millwoods working group and is using some of the Millhurst results.

July 1995 - November 1995 - Fifteen groups requested and received copies of the report and/or summary. Requests after November were not recorded

July 24, 1995 - Shirley from PATCH Place called to request the full Millhurst Report and several Asset Maps. She said that there had been many requests for the information.

November 1995 - Ontario Healthier Community Coalition requests information about the Millhurst Capacity Study.

? 1996 - Carole Lajoie, Regional Manager - Community Health and Public Health Service, CHA was connected with Rainbow Harbour.

February 1996 - D. Bell requests a copy of the Millhurst Report.

March 1996 - Cherlye Arnott, City of Scarborough, ON Requests a Millhurst Report.

October 1996 - Elaine Walsh, Scarborough Grace Hospital, ON requests the Millhurst Report.

November 1996 - NE Community Centre, Spokane, WA requests a Millhust Report and summary.

March 1997 - Juanita Hogg-Devine (Scarborough, ON) requests the Millhurst Report.

Whitecourt

March 1996 - CS Summary mailed out.

March 1996 - Cheryle Arnott (City of Scarborough, ON) requests the Whitecourt Report.

March 28, 1996 - Aspen Health provides additional funding for the SPICE project for the month of April. The money is to fund a celebration, phones and power for April, and Marci's salary for one day/week.

April 3, 1996 - Bonnie Ryan Fisher of Write Soon, calls to request the results of the Whitecourt study for some research she is doing.

April 9, 1996 - Andrea and Marci present the results of the C.S. to Town Council. Since highilights of the Council Meetings are broadcasted on the local radio station, and published in the Whitecourt Star, the SPICE team was able to get some free press time.

April 11, 1996 - Andrea, Marci, and Heidi present the results of the C.S. to the Municipal District Council.

Thursday April 18, 1996 - SPICE Celebration at Ernie O's. Approximately 20 people participated in the celebration.

May 1996 - A request is received from John Wilson, for the Whitecourt Asset Map.

Fall 1996 - Heidi moves to Ontario.

October 24, 1996 - Susan and Angie met with Dela Royan and Kelly Deis to discuss how we could support the SPICE team.

October 29,1996
- Susan and Angie are invited to speak at an Aspen Community Care and Public Health staff meeting. Tina was also present to share about the Whitecourt Capacity Study.
- a few emerged as supporters of the SPICE initiative: Dianne Cameron, David's wife, Paula, Debbie, John Dahl, Mr. Gould, and Mayor George.
- a stop at the library revealed that the library renovations were complete, and it was open for business - a good sign for the SPICE team who has been waiting to put their resource bank in the library.

November 13, 1996 - The North East Community Centre in Spokane, WA requests the Whitecourt Report and Summary.

December 9, 1996 - Andrea Smithinsky calls the CD office to request a copy of John McKnight's books for Mayor George Vander Berg. She also shares that she and her husband will be moving to Calgary.

January 23, 1997
- Kelly e-mails the CD office to inform us that Andrea is leaving this week, and that the SPICE team cannot locate the Whitecourt database. It seems that Tuan had the disk, and he has moved out of town, leaving no forwarding address.
- The SPICE team has now withered down to just one member - Tina.

February 19, 1997 - CD office receives an e-mail message from a teen mom in Whitecourt who is interested in SPICE. Her name and message is forwarded to Dela.

February 28, 1997 - Alberta Community Development requests 2 copies of the Whitecourt Report.

March 27, 1997 - Juanita Hogg-Devine, Scarborough, ON, requests the Whitecourt Summary and Asset Map.

April 3, 1997 - Dela Royan called to inquire about whether the CD office has the database disk or knows how to get a hold of it. Aspen is hoping to organize a gathering for the SPICE group in late April or early May. Dela will contact Marci, (now of Alberta Community Development), for assistance in locating the disk and planning the meeting.

April 1997 - The North Central Health District in Melfort, SK requests the Whitecourt Summary and Asset Map.

June 12, 1997

Other - Respect Week was declared. The Capacity Study information was used for contacts to develop.
-The Whitecourt Heritage Society has used quite a bit of information from the Capacity Study, as they develop the Heritage Museum. They accessed volunteers through the Capacity Study and fundraising.
-Since the Capacity Study an effort has been initiated to find a permanent space for Gymnastics and Taekwando. Mary Mercer is looking to build a centre for teens - a multipurpose facility. There is the possibility that they may share some space.
-Tina has had two phone calls for information from the Capacity Study. They were looking for specific things ie. bookeeping by donation or for cheap. Tina made the connection as she had interviewed a bookeeper.

Stratford

May 1996 - Capacity Study Summary mailed out.

June 1996 - Queens Health Region invites the Community Resource Committee to present at the Annual Meeting.

Summer 1996 - Community Resource Committee presents to Town Council

Summer 1996 - Meals on Wheels for Stratford Seniors begins as a result of a connection made during the Stratford Capacity Study.

July 1996 - Community Resource Committee receives a $5000 Community Animation Program grant to begin to develop Walking Trails in Stratford. Forty-four people from the survey had indicated interest in walking trails, and will be contacted to be a part of the planning after the initial research and land legalities are settled. Ten people are involved right now.

March 1997 - Two committee members are developing a baby-sitting Registry where they hope to connect people requiring baby-sitters with St. John's Ambulance qualified baby-sitters.

March 1997
- Community Gardens - arrangements are being made with Town Council to provide land for Community Gardens. Twenty people had indicated interest in such an initiative on the questionnaire, and will be contacted, once the land is made available.
- Dream Park - preliminary plans are under way for a community built Dream Park, which would be a playground for children and an area for seniors. This is a long range goal, that the Town Council is supporting and has provided seed money for some initial research.
- Committee membership has changed somewhat since May 1996. Eight out of twelve original members are still a part of the group, and two people who were surveyed, have joined.

*This information was obtained on April 4, 1997 from Brenda MacDonald, Stratford Community Resource Committee Member (902-368-6109)

Food Security

-November 1994 - Capacity Study Summary mailed out

December 13, 1994 - Andy Kwak of the Salvation Army, having read the report, called to inform the CD office of a correction in the information about his organization.

December 1994 - Anne Smith, Christ Church met with Hilda Sucre, Oliver Community League to inform her that they would be holding Community Suppers.

March 1995 to present - Christ Church now organizes and runs monthly Community Suppers. The Oliver Community League provides some volunteers.

March 1995 to July 1995 - Eleven groups requested and received copies of the report and/or the summary.

May, 1995 - First Baptist Church, Career Designs, and Community Development came together to talk about the possibility of teaching life and cooking skills to teens. A proposal is submitted to Alberta Advanced Education and Career Development. The proposal was not successful.

June 6, 1995 - Edmonton General Hospital - considering possibilities for using available space in the cafeteria for community programs and initiatives.

June 6, 1995 - The Edmonton Gleaner's Association (Food Bank) has begun to facilitate Community Kitchens and therefore they are helping people to help themselves.

Winter 1996 - Christ Church partners with the Oliver Community League for assistance with the Community Dinners. The Community League provides volunteers, and connects the church with the Upfolk Club who provides entertainment at the Community Dinners.

Other:
-Robertson Wesley Church has started a Community Dinner, and they also have a collective kitchen. Christ Church is planning to start a Collective Kitchen.

Appendix L:

Interview Schedule

Interview Schedule:

Date (1997)	Interviewee	Interviewer	Recorder	Telephone/ In Person	Audio Record
June 5	C1	Graham Mitchell	Angie Dedrick	In Person	yes
June 3	C2	Graham Mitchell	Mitch Miyagawa	In Person	yes
June 5	F1	Graham Mitchell	Mitch Miyagawa	In Person	yes
June 6	F2	Graham Mitchell	Angie Dedrick	In Person	yes
May 16/June 13	G1	Angie Dedrick	Graham Mitchell	In Person	no
June 9	G2	Graham Mitchell	Mitch Miyagawa	In Person	yes
June 20	M1	Graham Mitchell	Mitch Miyagawa	In Person	yes
June 16	M2	Graham Mitchell	Mitch Miyagawa	In Person	yes
May 20/ June10	O1	Graham Mitchell	Mitch Miyagawa	In Person	yes
June 5	O2	Mitch Miyagawa	Angie Dedrick	In Person	yes
May 28	S1	Graham Mitchell	Angie Dedrick	Telephone	yes
June 6	S2	Graham Mitchell	Angie Dedrick	Telephone	yes
May 30	W1	Graham Mitchell	Angie Dedrick	In Person	no
May 30	W2	Graham Mitchell	Angie Dedrick	In Person	no

Appendix M:

Limitations from Community Capacity Study Reports

Sample Limitations and Challenges from Capacity Study Reports:

- Due to time restrictions, interviews were conducted by phone. Ideally they would have been conducted in person.
- The high number of condominiums and apartments made it difficult to get in and talk to people.
- The number of questionnaires completed was small.
- There were human resource limitations - couldn't devote any personnel to the project for any length of time.
- Due to time restraints, only those businesses and associations within the physical boundaries of the community were included; had resources permitted, all businesses and associations having an effect on the community, but outside its physical boundaries, would have been surveyed.
- There was inconsistency in method of surveying as well as many different people conducting questionnaires.
- The study was conducted during the spring and summer when many people are on vacation, which made it difficult to find volunteers and contact people.
- The study was conducted during health reform, and many thought the survey was an attempt to save the hospital.
- The different people conducting surveys resulted in various interpretations and answers of some of the questions.
- Businesses in the mall tended not to be community-minded.
- Businesses that are part of larger franchise companies had no power to make individual decisions.
- None of the businesses in the mall had time to spend to complete a questionnaire.
- Churches were extremely difficult to contact.
- The capacity study was not seen as a priority for the Community League.
- Residual feeling of bitterness and cynicism and mistrust within the community regarding the changes in health care.
- There was limited volunteer time.
- Receiving funding had a negative effect on the group.
- Christmas holidays and delays in receiving funding meant volunteers would be dedicating more time than they had initially anticipated.
- The motivation of the group was lost.
- Found it difficult to talk to as many people as they would have liked.
- The team remained small, and the project did not "catch on".
- The numbers of surveys set in the goals was very discouraging for the little group of volunteers to accomplish.
- Certain questions were not being asked because the team member felt uncomfortable asking them.
- Different styles of asking the questions and presenting the information to survey respondents.

Appendix N:

Community Building Timeline

Community Building - Timeline

| | 1994 | | 1995 | | | | 1996 | | | | 1997 | |
Community	July–Sept.	Oct.–Dec.	Jan.–March	April–June	July–Sept.	Oct.–Dec.	Jan.–March	April–June	July–Sept.	Oct.–Dec.	Jan.–March	April–June
Glenwood (April–June: X)	X		O		O		O, A	O, A	A	A	A	A
Food Security		X O A	A	O A	A	A	A	A	A	A	A	A
Oliver	X	X	X	O	A	A	O A	A	A	A		
Millhurst			X	X	X		O A	A	A	A		
Children's Services				X	X	X	X	O				
Whitecourt						X	X	X O		O		O
Stratford						X	X	X O A	A	A	A	A

X = Capacity Study O = Community Animation A = Community Action

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Notes From Community Capacity Building and Asset Mapping: Timeline

The information for the timeline was complied from the list of "Next Steps" developed by the Community Development office and confirmed/ added to by interviewees. Only "formal" events are captured on this timeline. It does not include informal contacts, discussions, and activities.

This timeline is intended only as a rough comparison of the information gathering, animation, and activities each of the seven community groups engaged in. <u>It is not evaluative;</u> that is, it does not indicate either quality. Quantities, as well, are only roughly gauged; communities that have done many things in a three month time span are marked in the same way as those who have only done one thing. Comparisons (e.g. concluding that one community was more "active" than another) must be made with caution. For example, one community's actions may have continued for a long time but not required as much participation or effort (or been as successful) as another community's actions.

Capacity Study refers to the gathering of information on the resources, skills, and assets of a community, through personal conversation and contact. Each of the seven groups completed a capacity study.

Community Animation refers to "the development of spirit and enthusiasm within individuals and groups" that may lead to specific ideas for community action. "Formal" community animation involves bringing together members of community to discuss possibilities. Examples from the timeline include visioning workshops, meetings to discuss the results of the capacity study, and open houses.

Community Action is the planning, executing, and follow-up to specific community-driven initiatives. These initiatives are driven by citizens, acting independently of government or agencies. The community actions captured here were the result of information gathered, connections made, or ideas generated through either the capacity study or community animation. Examples from this timeline include community resource guides, community dinners, meals on wheels, and community gardens.

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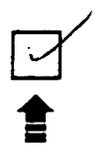
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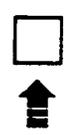
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