

Applied Promising Practices Toolkit Pilot Project

Victoria Native Friendship Centre Final Report

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Appendix A: Research Evidence Supporting the Promising Practices

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*Front cover
Artwork by Jamin Zuroski*

"I felt the rocks (stepping stones) were an instrumental piece of the design which represents the understanding of opportunity and growth. I also felt that Salmon (staff), who live their lives with great strength, determination, flexibility and adaptability learn how to surpass barriers within the rivers and oceans and use rocks as tools to maintain the livelihood of their offspring and use them as nesting grounds."

1. Project Background

The Federation of Community Social Services of BC (the Federation) first launched its Applied Promising Practices (APP) initiative in 2008. They invited community service agencies to identify a practice, activity, strategy, service or program that they believed was making a positive difference for children, youth and families, or for the practitioners and agencies that were delivering services to children, youth and families. In the first wave of APP initiatives, groups based in four areas of the province looked at practices in residential care, clinical supervision in family development work, early years development and youth hub models¹.

Through a facilitated process, the community agencies and the Federation APP team learned about the promising practices, identified key elements of success (and challenges), compared the practice-based evidence with available research evidence, built ‘communities of practice’, and encouraged ‘scaling up’ of the most promising practice – examples of scaling up could include expanding the application of the promising practice to additional client groups, program areas, geographical areas or organizations.

The communities of practice encouraged curiosity, reflection, applied research and learning. Some of the groups had short lifespans, whereas others may continue to meet into the future.

In a broader sense, the APP Project also helped the participating agencies and the Federation learn how to increase:

- Organizational capacity to collect and analyze data from ongoing service delivery;
- The use of quality improvement processes for ongoing enhancements to service delivery; and
- The adoption and integration of promising practices in child, youth and family organizations through the timely distribution of new and emerging knowledge to front-line practitioners and program leaders.

In 2013, the Ministry of Children and Family Development’s (MCFD) Applied Practice Research & Learning (APRL) Branch partnered with the Federation of Community Social Services of BC to develop the [Applied Promising Practices Toolkit](#). In 2014/15, APRL and the Federation set out to pilot the toolkit with four promising practices. In the summer of 2014, they initiated the APP Toolkit Pilot Project, in which four promising practices were selected from within the province in order to assess the efficacy of the APP Toolkit prior to promoting it more broadly across MCFD and the social services sector.

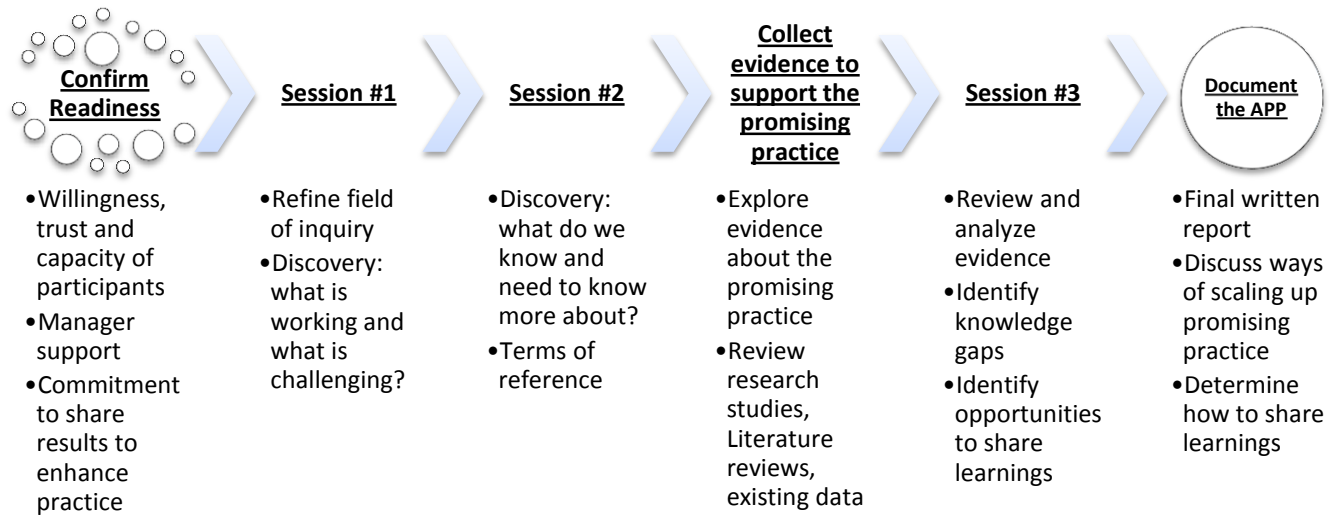
A “promising practice” is an activity, strategy, service or program that has preliminary evidence of effectiveness in smaller scale interventions and for which there is potential to generate knowledge and expand the intervention.

¹ More information can found on their website: <http://fcssbc.ca/alliances/applied-promising-practices/>

2. The Applied Promising Practices (APP) Process

An APP project is, by design, a practice-based, practitioner-driven undertaking; one does not have to be in a formal leadership position to invite others to participate in the process of co-learning. Shared leadership and responsibility are keys to its success over time. The APP process is designed to be a collaborative and iterative process whereby participants are given the opportunity to examine their own practice-based experiences.

Although the APP approach is considered relatively flexible in nature, there is a general flow to the APP process. In terms of flexibility, additional sessions can be convened, timeframes can be flexible, and participant groups can change over time. The following diagram depicts the general flow of the APP process in identifying, documenting and sharing learnings about promising practices:



2. A) Project Selection – Victoria Native Friendship Centre (VNFC)

In 2014/15, the APRL Branch set out to evaluate the efficacy of the APP approach and Toolkit, and to assess the resources that are required to carry out APP projects prior to promoting it more broadly across MCFD and the sector. As such, the APRL Branch collected and reviewed a variety of proposals for potential APP projects against the following ‘readiness criteria,’ which is an abbreviated list of what is outlined in the APP Toolkit itself:

- The willingness, trust and capacity of participants;
- Manager support; and
- A commitment to share results to enhance practice.

The Victoria Native Friendship Centre (VNFC) was one of four groups selected to participate in the APP Toolkit Pilot Project in the fall of 2014. VNFC was chosen in part due to the great strides the organization

has made in its early years programming (Aboriginal Supported Child Development –ASCD, Aboriginal Infant Development Program – AIDP and Early Childhood Development – ECD).

The Victoria Native Friendship Centre has been in existence for over 40 years and provides services to an estimated 15,000 Aboriginal people living off reserve in the greater Victoria area, as well as to 5,000 residents from the First Nations communities in the southern Vancouver Island region. They provide a vast array of programs and services that support people of all ages, from infants to Elders.

One of VNFC’s noted strengths was its success in engaging families, even those deemed “hard-to-reach”, and often even before services are available (e.g., while families are still on a wait list). This APP project sought to explore what makes VNFC successful in establishing high levels of family/client engagement.

2. B) APP Participants

At the onset of the VNFC APP Project, VNFC program leaders met for a first session with APP coordinators to explore various factors contributing to the success of the centre’s approach. At this meeting, the program leaders chose to open up the next APP session to a larger number of VNFC staff. The second session was broken into two different meetings due to demands on staff time – a total of 13 staff members representing the various programs at the centre took part throughout the day. At the final APP session, VNFC staff were presented with research evidence collected on key themes, and they had the opportunity to discuss ways to share their learnings with the broader community.

The Federation contracted two Project Facilitators to coordinate the project. The facilitators were responsible for planning, organizing and guiding the APP sessions; developing materials, completing research and reports, and arranging unique ways of sharing learnings from each of the pilot projects.

APRL Branch staff attended sessions and conducted an evaluation of the project with the following objectives:

- To learn about and assess the usefulness of the APP approach;
- To assess the usefulness of the APP Toolkit; and
- To assess resources used in the APP process.

A number of data sources and methods were employed to meet the evaluation objectives, including hosting debriefing sessions with the facilitator, conducting a participant survey, holding interviews with key contacts of each of the four projects, facilitating focus groups with APRL staff observers, and developing project documents.

2. C) APP Sessions

The fundamental purpose of an APP project is to learn about promising practices through a collaborative and iterative approach that brings practitioners together as a group to focus on new or emergent practices and their applications and impacts. At these sessions, practitioners share what they think is working, and then through a stepped process, they identify key themes that emerge from the discussion. Research literature is then explored to uncover evidence that supports the practices that groups are finding to be successful.

Project Phase	Timeframe	Key Players	Summary
APP Session #1	Early December 2014	<ul style="list-style-type: none"> Project Facilitator APRL staff member 4 VNFC Program Leaders 	<p>Participants considered factors that may be contributing to the high levels of family/client engagement at VNFC.</p> <p>The APP set out to explore:</p> <ul style="list-style-type: none"> How does working within the Indigenous Circle serve the community and the higher good? How does this work impact the programs and activities to build engagement? How can other organizations benefit from understanding VNFC’s vision, mission and approach to community and staffing practices?
APP Session #2	February 2015	<ul style="list-style-type: none"> Project Facilitator APRL staff 13 VNFC staff (representing wide range of programs & services) 	<p>At this session, a consensus emerged among staff members that there was an overarching set of principles that guided every aspect of VNFC’s work with families. These were articulated with the “Indigenous Circle” and include:</p> <ul style="list-style-type: none"> Respect, Relationships and Dignity “Meeting people where they are” Grounding practices and mission firmly in Indigenous tradition, culture and history. Flexibility and Adaptability Holding people up by recognizing their strengths.
Evidence Collection	Feb 2014- May 2015	<ul style="list-style-type: none"> Project Facilitators APRL staff 	<p>Collection, review and organization of research literature in order to develop and support key themes from the promising practices discussed.</p>
APP Session #3	May 2015	<ul style="list-style-type: none"> Project Facilitator APRL staff 5 VNFC staff 	<p>Participants were provided the research evidence to support some of the key theme making client/family engagement successful.</p> <p>Discussions took place regarding how to share the learnings with the larger community.</p>
Knowledge Sharing	Ongoing	<ul style="list-style-type: none"> APP participants VNFC Staff and community 	<p>The VNFC APP group chose to commission a local Aboriginal artist, Jamin Zuroski, to transform the Indigenous Circle into a work of art to be on display at the centre and for broader dissemination purposes. This artwork is presented on the front cover of this report.</p>

2. D) Discovery:

At the first APP session, VNFC staff met to explore the factors leading to its high levels of family/client engagement. During the meeting, it became apparent that the organization's strong commitment to grounding programs and staff practices in a community-centred approach that is firmly anchored in Aboriginal worldviews and ways of being, were key to this success.

As a result of the first APP session in late November 2014, the APP participants chose to examine the following promising practice:

"How does the development of programs and resources, using a community-centred approach, lead to high levels of engagement for those they serve?"

A community-centred approach means that all groups / stakeholders in a community who are involved or have an interest in a service or agency are given the opportunity to participate actively in the planning, operation and/or implementation of programing and services provided by that agency.

By participating in this reflective and iterative process, the APP participants were able to step back and observe their engagement in the organization from a different perspective. As a result, the participants reached a consensus that there were an overarching set of principles guiding every aspect of VNFC's "way of being" with the individuals, families and Indigenous communities they serve. These principles were identified as being vital to creating high levels of engagement and a strong sense of community at VNFC.

To ensure these principles of engagement were understood and articulated, the project coordinator led VNFC staff members through a reflective process to capture and document this promising practice. What emerged was a visual representation of what VNFC staff described as "The Indigenous Circle", which formed as stepping stones in a pond, each encompassing a particular "guiding principle" that staff members adhere to when working with families and individuals in the community.

The diagram on the following page was produced from these discussions and presented to the APP participants at the second APP session in order to confirm its validity.

**The Indigenous Circle:
Victoria Native Friendship Centre's Guiding Principles of Community Engagement**



As illustrated, each of the stepping stones is important and connected to the others, forming a circle that encompasses the community.

With the key learnings further clarified and consolidated in the first two meetings, the project coordinator set out to link the practice-based evidence they had gathered and compare it to research evidence. VNFC participants met a third time in late May to review the findings of an in-depth research report that the project coordinators prepared, and to decide how to move forward in "telling their story."

3. APP Session Findings

The VNFC APP project set out to explore the factors and strategies that have led to high levels of family/client engagement in order to identify, document and share those learnings.

For the purposes of the APP project, the principles represented by each stone were grouped into four themes that encompassed the guiding principles of the Indigenous Circle. The overarching concept that connects the stepping stones to one another is what staff called “Indigenous ways of being.”

Throughout the APP process, four key themes emerged:

1) Respectful Practice

- Honour, dignity, humility
- Cultural safety
- “Walk beside” (intake workers/staff take ownership of relationships with clients)

2) Strength-based

- Assuming that people are their own experts
- Recognizing diversity among each family and individual
- Believing all people have the ability to create positive change in their own lives

3) Community-Centered & Flexible

- Building relationships
- Flexibility/Adaptability

4) Firmly Grounded in Culture

- Aboriginal History
- Aboriginal Culture

3. A) Theme 1: Respectful Practice

All of the VNFC staff members emphasized the importance of showing respect to all community members and to one another. According to the Aboriginal worldview, all living things are sacred and therefore must be shown the honour and dignity they are due. In this worldview, each individual is sacred and the health and well-being of the entire community depends upon the health and well-being of the individuals that form it. The respectful practices theme encompasses many of the stepping stones in the ‘Indigenous Circle,’ including dignity, humility, honour, earning trust and staff being approachable and accessible by being in the community and setting a positive example.

The interaction that the Victoria Native Friendship Centre has with the communities it serves is a unique feature of the organization – one that gives them great credibility within their service communities and beyond. The VNFC organizational culture reflects Aboriginal values in every facet of their service delivery model, particularly staff and client/family interactions. The ‘respectful practices’ theme is also supported in the research literature. Indigenous community members report feeling comfortable going to the Friendship Centres and accessing services, because these organizations are grounded in Aboriginal ways of being and worldviews that honour differences and value respect, humility and

dignity. According to VNFC staff, these facets of their approach are essential to the success of the organization.

Research evidence on this theme says:

The importance of “relationship-building” and social relationships was noted as being fundamental both in early intervention and in the ongoing support of families (FCSSBC, Core BC, 2013).

Brunner (2004) spoke of the development of social capital through specific programs and strategies, and noted that “relationships and practices (as much as or more than program structure or curriculum) are key to achieving success and effective family strengthening programs and strategies.

Within the health care sector, Beach et al. define respect as the “recognition of the unconditional value of patients as person”. They go on to state that this respect must be accorded equally to all, independent of one’s personal characteristics (Beach et al., 2007).

3. B) Theme 2: Strength-Based

When a relationship is initiated with a new individual/family, VNFC staff emphasize the importance of “meeting people where they are at.” Staff members make a concerted effort to take time to listen to people without passing judgment. People are regarded as their own experts, and the diversity of each family is taken into account and respected. Instead of trying to discover the “deficits” or problems individuals/families might need assistance with, VNFC staff help people to see the strengths that they do possess.

One staff member noted that sometimes when individuals first arrive at the centre, they may feel like they have no strengths. VNFC staff members walk beside individuals and families and help them to discover the strengths that they already possess, by instilling a positive sense of self-worth and being available to support individuals/families in any challenges they may need to overcome. This strengths-based approach creates a welcoming, non-judgemental environment that builds trust amongst the people they serve.

Research evidence on this theme says:

A Scottish study highlighted the unique ways in which a strength-based approach builds relationship “between those providing and being supported, as well as the elements that the person seeking support brings to the process” (Miller, Duncan and Hubble, 2001).

Specific to the Aboriginal context, scholars such as Wesley-Esquimaux & Snowball (2010), Margot & Laretta (2006), and Taylor et al. emphasize the importance of utilizing a holistic, community-centered, strength-based approach to service delivery.

3. C) Theme 3: Community-Centered & Flexible

At VNFC, staff members are very much a part of the community they serve. One of the first things that new employees or practicum students at VNFC are taught is the importance of taking time to be in the community. Staff members are encouraged to participate in community events and to be positive role models that are present and respected in the community.

For example, one of the weekly activities at VNFC is the sharing of a meal on Fridays. During this event, everyone at the centre contributes, regardless of their position. This approach helps to build a sense of community and teaches the staff humility. This act of servant leadership demonstrates to the individuals and families served at the centre that it is not a place of “us versus them,” but just of “us.”

One of the stepping stones in the Indigenous Circle that overarches all of the aspects of VNFC’s way of being is that of flexibility. All of the programs and services that VNFC provides are based on the needs of the community, and therefore must be flexible enough to be able to change and adapt to the needs of those they serve.

For example, VNFC’s “Awakening the Warrior Within” program has high levels of engagement and participation among community members. The program was created as a culturally relevant means to deal with violence within families. The program’s success is even more remarkable considering it is mainly attended through a self-referral process. The program was originally designed to address male violence and was focused on men in the community. However, stemming from a high degree of interest and desire of women in the community for the program, VNFC developed and now implements a parallel women’s group. The intent of the program is to provide the opportunity for Aboriginal men and women to examine family violence in the context of their own history and culture, and to gain a deeper understanding of its impacts on self, family and community. This program exemplifies the *flexible, community-centered approach* carried out at the Victoria Native Friendship Centre.

Research evidence on this theme says:

Family Resource Programs are not a 'one size fits all' resource...each program tailors itself to the characteristics of the community it is immersed in by creating programs and partnerships that will respond to the community strengths and needs. In a nation-wide study in US of programs that targeted at-risk neighbourhoods this was found to be a key element of success in community-building initiatives (Silver et al., 2005)

Many authors have noted that the process of change needs to be initiated and implemented by the Aboriginal communities themselves, not by outside forces, interests, or influences (Couture, 1987; Dimock, 1981; Duran & Duran, 1995; Poonwassie, 1993; Régnier, 1995).

3. D) Theme 4: Firmly Grounded in Culture

The APP participants greatly emphasized the role that Aboriginal culture plays in all of the centre's activities. It was clear that without a firm understanding of Aboriginal culture, traditions, community practices and ways of being, it is impossible to effectively engage the diverse community they serve. Aboriginal cultures, worldviews and identities are intimately woven into all of the programs and services offered through VNFC.

VNFC staff members demonstrate a clear understanding and respect that each individual has a unique cultural heritage, set of customs and language. Therefore, through the programs and services the centre offers, individuals are supported in discovering the unique history of their ancestors and of the generations that have gone before them. They are given the opportunity to learn the knowledge passed on by Elders, and to participate in cultural activities and ceremonies. Drumming, basket-weaving, singing and dancing, talking circles and other customs and celebrations are all integral parts of the activities at the centre.

Research evidence on this theme says:

Native communities have healing practices that have worked for thousands of years. If policymakers and providers truly want to be culturally appropriate, it is essential that they become more conscious of what people are doing in their own communities that works. It is important to support existing efforts and help communities develop or demonstrate evidence for their programs. This requires funding implementation and evaluation of "promising" and community based practices for communities." (Goodkind et al., 2010).

Cultural Safety has been defined as: "an environment that is spirituality, socially and emotionally safe, as well as physically safe for people; ... It is about shared respect, shared meaning, shared knowledge and experience of learning together" (Robyn Williams 1999, as cited in Atkinson, 2014).

4. Potential Applications of the Applied Promising Practice

Key components of the Applied Promising Practice Toolkit highlight the value of promising practices and propose ways in which the learnings can be shared and applied more broadly. This table outlines some possible ways in which the learnings from the Victoria Native Friendship Center APP pilot project could be applied by a variety of stakeholder groups.

Discovery and Learnings	MCFD Field Staff	Service Providers	Policy Makers	Strategic HR/ Learning and Development	Funders	Public
a. Effectiveness of a Community-Centered Approach	✓	✓	✓	✓		
b. The importance of overarching engagement principles	✓	✓	✓	✓	✓	
c. The importance of meeting clients “where they are at”	✓	✓	✓	✓	✓	✓
d. Strengths-based approach to client interactions	✓	✓	✓			
e. Respectful staffing practices based on staff “walking beside” them	✓	✓	✓	✓		
f. Believing that people are their own experts	✓	✓	✓			
g. Flexibility and adaptability in service provisions and programming	✓	✓	✓			
h. The importance of the concept of cultural safety in all of the services/activities	✓	✓	✓	✓		
i. The importance of using an Aboriginal worldview when developing programming		✓	✓	✓		

5. Conclusion

The effectiveness of a program or service can only be understood by collecting and evaluating data that relates to its goals. The Victoria Native Friendship Center APP Project set out to examine:

"How does the development of programs and resources using a community-centred approach lead to high levels of engagement for those they serve?"

The APP process engaged participants in a collaborative and iterative process whereby they identified ways in which using a community-centered approach had worked well, and attempted to discover the driving factors behind those successes. Examples found in the research literature provided further support to the success factors that participants had identified.

Through a collective and reflective process, APP participants were able to define and articulate a set of guiding principles that VNFC staff members adhere to when working with families and individuals in the community, which, in turn, led to a high level of client/family engagement.

The emergent learnings from the VNFC APP Project are as follows:

- Aboriginal services should be based on Indigenous “ways of being”;
- The importance of “respectful,” “strengths-based,” and “flexible practice”;
- Success comes from the “community-centric” model; and
- Practice with clients’ needs to be “firmly grounded in culture” as a means of creating cultural safety for clients/families.

The VNFC APP Project affirmed the value of community-centred practice as a powerful tool for practitioners who work with families with young children, and points to the potential benefits of sharing this perspective with a wide array of service delivery providers within British Columbia and beyond. It is hoped that the findings identified through this project will be shared within the ministry and amongst other community service providers to enhance the ongoing development of policies, planning and decision-making based on practice-informed evidence.

Appendix A – Research Evidence Supporting the Promising Practices

This appendix summarizes the research-based evidence found the literature review phase of the Victoria Native Friendship Centre (VNFC) APP Project. The literature review began with an exploration of the promising practices the APP participants identified and articulated in the “Indigenous Circle” (p.6). Those practices were further refined and grouped into four thematic categories or “guiding principles,” which participants felt were directly responsible for their high levels of client/family engagement at the centre.

The Victoria Native Friendship Centre’s four guiding principles are *respectful practice, strength-based approach, community-centred, flexible and adaptable, and firmly grounded in culture*. The literature review undertaken for this Applied Promising Practice Project revealed substantial evidence related to these four themes.

Theme 1: Respectful Practice

The importance of respect for the individual, the community and the environment can be found throughout the literature that highlights Aboriginal worldviews. Respect is also a concept frequently invoked as an integral aspect of ethics and professionalism within the health care and social services sectors. For example, in speaking of the health care sector, Beach et al. (2007) define respect as the “recognition of the unconditional value of patients as persons.” They go on to state that “respect must be accorded equally to all, independent of one’s personal characteristics” (Beach et al., 2007). This is related to the Indigenous worldview that states that all living things deserve respect, dignity and honour.

An example of mainstream practice-based evidence that supports VNFC’s guiding principle of respectful practice in service delivery is found in the UK’s health sector. Attree (2001), when researching patient and relatives’ perceptions of high-quality care, identified the components of compassionate care as including: respect, dignity, privacy and the opportunity to exercise choice about care and treatment. Loebe (2006) observed additionally that patients value “the opportunity to discuss their emotions, to be addressed by their preferred name, to receive appropriate touch and contact, and to be given time to share a personal story.” These aspects of personalization and emotional care are described by patients as “going a long way to making intolerable or distressing situations bearable” (Loebe, 2006). Patients and relatives in another study stated that staff who appeared “friendly, warm, sociable, approachable and who engage with patients in a way that builds rapport” were perceived as good practitioners (Van der Elst et al., 2011). The staff practices and characteristics discussed in these studies are identical to those found in VNFC’s community-centric approach.

Another study done with Indigenous populations in Hawaii found that “a key characteristic of Hawaiian individuals and families is compassion.” The term “aloha” refers to the “intelligence with which we meet life” and the belief that “compassion is a sacred idea that connects us to spiritual traditions” (Meyer, 2003, p. ix). Compassion in Native Hawaiian culture is what invokes values of collective rather than individual good, and these focal points of compassion and collective good are often at odds with Western values of individual ownership and advancement (S. Kana'iaupuni, 2005).

Further to the idea that Western values are often incongruent with Aboriginal ways of being, scholars Wesley-Esquimaux & Snowball (2010) state:

We must recognize and acknowledge that reverence for life and communication between all things is easily lost within the changing nature of contemporary Aboriginal and western society. The de-centering of traditions in Aboriginal communities has often left people without a core in their social relationships. This disconnection can create disparity in understanding, leaving Aboriginal people vulnerable to power hierarchies and entrenched social divisions and unable to come together in respectful unity and caring (2010).

Numerous other studies were also found that emphasize the importance of staff displaying certain characteristics and traits that result in respectful engagement with those they serve. Among those traits, which match VNFC's 'way of being' are: "warmth, empathy, care, ability to share power and control, welcoming, non-judgmental, positive, and ability to support in a non-directive manner" (Best Start panel, 2007; FRP-BC, Ellis and Barbeau, 2008; FRP Canada, 2002, 2007, 2008; Healthy Families America, 2002; Hornsby, 2007; Kyle, 1993; Mann, 2008; Silver et al., 2005; Reilly 2008; Kyle and Kellerman 1998; Los Angeles County Children's Planning Council, 2001; Mueller 1996; Powell, 2007; Dunst and Trivett, 1998; Slaughter, 1988, Trivette and Dunst, 2005; Trivette, 2009, as cited in FCSSBC, Core BC, 2013).

Theme 2: Strengths-Based Approach

VNFC staff members *walk beside* individuals and families and help them to discover the strengths that they already possess. This promising practice proves invaluable in giving people confidence, instilling a positive sense of self-worth and supporting individuals/families in overcoming various challenges they may be facing. The VNFC APP participants felt that the welcoming, non-judgemental, strengths-based approach they adhere to when dealing with clients/families builds trust amongst the people they serve and the staff, which, in turn, results in higher levels of engagement and cultural safety.

There is a plethora of research on strengths-based approaches, which are described as being strategies that "concentrate on the inherent strengths of individuals, families, groups and organizations," to "aid recovery and increase capacity for empowerment" (Pattoni, 2012). In essence, the research suggests that to focus on health and well-being means to embrace an asset-based approach to service delivery where the goal is to promote the positive aspects and elements within that person, community or situation that might be harnessed in order to find solutions and improve outcomes.

Over the past several decades, there has been a movement across disciplines towards positive approaches to client engagement, though there may be various terms that describe the approach. For example, in mental health care, there has been a strong focus on "recovery and positive psychology," an inherently strengths-based perspective (Petersen & Seligman, 2004, as cited in Pattoni, 2012). In community development, the term "asset-based" is used to describe communities focusing on areas of potential rather than areas that are lacking (Kretzmann & McKnight, 1993, as cited in Pattoni, 2012); and prevention practitioners use words such as "resilience" to describe "an individual's ability to function well and achieve goals despite overbearing stresses or challenges" (Pattoni, 2012).

There is some evidence in mainstream literature and a great deal in Aboriginal scholarship that suggests positive outcomes for clients when using a strengths-based approach to deliver services, particularly in terms of relationship building and engagement. A Scottish study highlighted the unique ways in which a strengths-based approach builds relationships and allows for a flexible, engaging process to develop:

Strengths-based practice is a collaborative process between the person supported by services

and those supporting them, allowing them to work together to determine an outcome that draws on the person's strengths and assets. As such, it concerns itself principally with the quality of the relationship that develops between those providing and being supported, as well as the elements that the person seeking support brings to the process. Working in a collaborative way promotes the opportunity for individuals to be co-producers of services and support rather than solely consumers of those services. (Morgan and Ziglio, 2007, as cited in Pattoni, 2012).

International research into organizations that serve families has found that a family-centric strengths-based approach is associated with increased service engagement, increased parenting competency, and enhanced interaction among family members. MacLeod and Nelson (2000), in a review of 56 programs, found evidence to support the view that this type of empowerment approach is critical in terms of successful interventions with vulnerable families (Pattoni, 2012).

Specific to the Aboriginal context and communities, Native Hawaiian scholar Shawn Malia Kana'iaupuni states:

Whether we are talking about discrimination, violence, or friendship, one would think that a likely antidote for negative experiences is positive experiences. Might not the same be probable in research? Strengths-based approaches, which have taken root in the field of social work, psychiatry, and business, make the case that drawing on the strengths of individuals is the best way to reduce the negative and increase the positive in individuals and families (2005).

Taylor et al. (2004) emphasize the importance of utilizing a holistic, community-centered and strengths-based approach:

A holistic approach involves more than co-ordination of responses; it demands that existing responses are integrated and that a developmental approach is undertaken to enable the community to build on existing strengths to implement the initiatives it identifies.

The literature review clearly supports VNFC's strengths-based approach as a promising and effective practice, particularly when dealing with vulnerable families and communities.

Theme 3: Community-Centric & Flexible

The principles from the Indigenous Circle that overarch all of the aspects of VNFC's way of being are community, flexibility and adaptability. All of the programs and services that VNFC provides are based on the needs of the community; therefore, they must be flexible enough to be able to change and adapt to those needs. There was a great amount of evidence in the research supporting this community-centric approach, in which the "active participation and 'voice' of the community is actively sought out and honoured" (APP Participant).

Speaking specifically from a community perspective, Gilchrist(2009) stressed the importance of building networks within communities, which results in individuals, families, and the wider community building 'resilience', which leads to a greater sense of well-being and greater quality of life (Pattoni, 2012). Studies have shown community-centered approaches which are strengths-based have led to reduced drug use; lower rates of arrest and conviction; improved levels of social functioning (Shapiro, 1996); and numerous positive results when used with children, youth and families (Park and Peterson, 2006; Arnold et al, 2007; Lounsbury et al, 2009; Early and Glenmayer ,2000, as cited in Pattoni, 2012).

In 2000, a number of large mainstream organizations and agencies, including UNICEF and USAID, held a forum with the objective of broadening the participants “understanding of theories, case studies, resources, and networks related to community-centered approaches for behavior and social change” with the goal of improving “participant’s capacity to apply and expand community-centered approaches in their work” (NGO Networks for Health, 2000). The opening statement of the report produced following the forum stated:

Community engagement, empowerment, and ownership are key to achieving sustained behavior change for improved health and development. The challenge facing non-governmental organizations (NGOs), private voluntary organizations (PVOs), government agencies, and others is how to foster and sustain this type of active community involvement (NGO Networks for Health, 2000).

Dimock (1981) also connects the notion of empowerment to social change and describes a number of assumptions about working within changing social systems, including:

- The community is the focus of change;
- The people affected by the change should be involved in implementing that change;
- Those who have power in the system must support the change if it is to succeed
- Resistance to change is normal and will assist in the stabilization of new changes; and
- Change is more likely to occur when opposition is reduced, rather than when support is strengthened.” (2001).

These aspects of Dimock’s study are echoed in the promising practices, guiding principles and “ways of being” at VNFC.

Silver et al. (2005) also acknowledge the importance of a community-centred approach in their study describing staff practice in Family Resource Centres, and the impact of those practices on participants and clients. They identified four practice themes (engaging families; empowerment; social support and development of social capital; and building community) and describe how community connections and networks can greatly assist parenting:

The ecological approach proposes that there is an interconnection between individuals and the social groups in which they are embedded. One of its implications is that the well-being of the children is dependent on the well-being of their families. In turn, the well-being of families and individuals is dependent upon the quality of life and resources available in the community where they live. Successful interventions must necessarily focus on children, their parents, and the wider community (from Toward Experimental Evaluation of the Family, Infant and Preschool Program, Dunst 1988, also cited in Silver et al. 2005).

VNFC’s community-centred approach to individuals and families places great value on the relationships with Elders and, particularly, children. One Elder, Chief Frank, explains, “While people of all ages are known to be sacred and are valued within the Aboriginal culture, perhaps the most emphasis is placed on the sacred role of the children in the community. Since the beginning of time, Indigenous people have known that our children are precious and sacred, and the heart of family and community... the purpose of life is our children.”

The literature review clearly supports this promising practice, with evidence demonstrating that a community-centric, flexible and adaptable service delivery model across sectors that deal with children

and families is the most likely to result in positive outcomes. In addition, the Los Angeles County Children’s Planning Council (2001) found that “allowing families to take part in defining services builds the *trust* required to *engage* them at a much deeper level” (as cited in FCSSBC, Core BC, 2013). As noted in the sessions, VNFC staff create a culture of feedback and belonging through respectful and strengths-based approaches to individuals and community members and involving them in the processes of overcoming challenges and accessing services.

Theme 4: Firmly Grounded in Culture

“There is a recognized need to return to and invigorate ancestral “wise practices” and engage community members, from youth to Elders, in a reassertion of fundamental belief structures, values and ceremonial practices. Taking back and revitalizing “our own ways” will ensure that Aboriginal peoples will continue to re-connect their traditions and practices and strengthen the sacred circle of life” (Wesley Esquimaux & Calliou, 2010).

Of equal importance to community-centred approaches in terms of empowering Aboriginal populations is the fact that “the process of change needs to be initiated and implemented by the Aboriginal communities themselves, not by outside forces, interests or influences” (Poonwassie & Charter, 2001). Native communities have healing practices that have worked for thousands of years. If policy makers and providers truly want to be culturally appropriate, it is essential that they become more conscious of what people are doing in their own communities that works. It is important to support existing efforts and help communities develop or demonstrate evidence for their programs. This requires funding implementation and evaluating “promising” and community-based practices for Indigenous communities (Goodkind et al., 2010).

The APP participants identified key approaches that they felt were essential to understanding the importance of firmly grounding the work they do in Aboriginal culture. Those elements are:

- A holistic view of health and well-being;
- The importance of being trauma-informed; and
- The importance of cultural safety and connection.

I. Holistic Health and Well-being

Not only was there an abundance of evidence emphasizing the importance of viewing health and well-being from a holistic viewpoint within Aboriginal literature, but there was also support for this holistic view in mainstream sources. For example, the World Health Organization defines health as “a state of complete physical, mental and social-well-being...” (WHO, 2006, as cited in Margot & Laretta, 2006). Similarly, Health Canada has provided leadership in shifting its understanding of well-being away from the previously-held narrow view of health as being synonymous with “the absence of disease,” and is now attempting to view health in a more holistic manner: “this broader notion of health recognizes the range of social, economic and physical environmental factors that contribute to health” (Health Canada, *Population Health*, 2015). As Penny Ericson, Dean of the Faculty of Nursing at the University of New Brunswick, stated when addressing the Royal Commission of Aboriginal Peoples during a public consultation session:

It is powerful for Aboriginal people to realize that one of their traditional approaches to health (the Medicine Wheel) is now viewed as progressive and crucial by health care educators and policy planners within the United Nations and Canada... The interplay of the physical, emotional, social and spiritual for achieving well-being has long been inherent in the Aboriginal health paradigm and is now appearing as a stated value in health care teaching in Canada (Royal Commission, 1996, p.5 on website, as cited in Margot & McKenzie Lauretta, 2006).

II. Trauma-Informed

VNFC staff spoke of the importance of being “trauma-informed” in their practice. In 2001, Harris & Falloot first made the distinction between “trauma-specific services” (clinical treatments) and the culture change referred to as “trauma-informed care” (as cited in the National Center for Trauma-Informed Care, 2012). Since then, important work has been carried out that has contributed to knowledge in this field in an Aboriginal context. Judy Atkinson, in working with the Aboriginal and Torres Strait Islander families and communities, defined “historical trauma” and “trans-generational trauma”:

Historical trauma is defined as the subjective experiencing and remembering of events in the mind of an individual or the life of a community, passed from adults to children in cyclic processes as ‘collective emotional and psychological injury ... over the life span and across generations’ (Muid, 2006, p. 36).

Milroy (2005) gave a comprehensive explanation of how trauma is transmitted across generations and the role that community networks play in this transmission:

The trans-generational effects of trauma occur via a variety of mechanisms including the impact on the attachment relationship with caregivers; the impact on parenting and family functioning; the association with parental physical and mental illness; disconnection and alienation from extended family, culture and society. These effects are exacerbated by exposure to continuing high levels of stress and trauma including multiple bereavements and other losses, the process of vicarious traumatization where children witness the on-going effect of the original trauma which a parent or other family member has experienced. Even where children are protected from the traumatic stories of their ancestors, the effects of past traumas still impact on children in the form of ill health, family dysfunction, community violence, psychological morbidity and early mortality. (Atkinson et al., 2010).

Indigenous scholars in Canada have done a tremendous amount of work on trauma-informed practice from an Aboriginal perspective. Nathalie Clark cautions against following certain mainstream approaches of the “trauma industry” and emphasises the need for a “trauma-practice framework” that is specific to the Aboriginal context. She cautions that some mainstream “trauma-informed practices” can actually further label and “pathologize” Indigenous children and youth causing “re-traumatization” (2013). Wesley-Esquimaux & Snowball state:

Native people are increasingly aware of the historic trauma impacts that cross physical, economic, social, cultural, psychological and spiritual borders and manifest as maladaptive social patterns. We are becoming better versed in the discussion around complex post-traumatic stress response, which in addition to disabling individuals, has created a deeper dis-ease in entire cultural communities (2010).

The literature clearly demonstrates that having a trauma-informed lens on policy and practice is not only

a promising practices in terms of Aboriginal service delivery models, it is imperative to the revitalization and overall well-being of Indigenous families and communities.

III. Culturally Safe & Connected

“Cultural Safety” has been defined as “an environment that is spirituality, socially and emotionally safe, as well as physically safe for people: it is about shared respect, shared meaning, shared knowledge and experience of learning together” (Robyn Williams 1999, as cited in Atkinson, 2014). The concept of cultural safety was first developed in 2002 by Irihapeti Ramsden, a Maori nurse and educator. In Ramsden’s view, in a social service context, the recipient of an interaction determines whether or not they perceived it as culturally safe (Brascoupe, 2009). The concept of cultural safety is now viewed as critically important to achieving positive outcomes in Aboriginal service delivery. An evaluation of the Aboriginal Healing Foundation’s (AHF) 140-plus projects implicitly identified cultural safety as critical to healing, and that relationships based on acceptance, trust and safety are the first step in the healing process (AHF, 2003a, 2008, as cited in Brascoupe, 2009).

Unlike the linked concepts of cultural sensitivity or cultural competence that may contribute to a service recipient’s experiences, cultural safety is seen as an outcome of: respectful practices; strengths-based approaches; and community-centred, flexible and adaptable services. Regardless of how culturally sensitive, attuned or informed we think we have been as a service provider, the concept of cultural safety asks: “How safe did the service recipient experience a service encounter in terms of being respected and assisted in having their cultural location, values, and preferences taken into account in the service encounter?” Cultural safety, therefore, becomes a means to change broad attitudes and deep-seated conceptions on an individual and community-wide basis. (Brascoupe & Waters, 2007).

Brascoupe and Waters (2007) identify five principles that are necessary for cultural safety:

- **Protocols** – respect for cultural forms of engagement;
- **Personal knowledge** – understanding one’s own cultural identity and sharing information about oneself to create a sense of equity and trust;
- **Process** – engaging in mutual learning, checking on cultural safety of the service recipient;
- **Positive purpose** – ensuring the process yields the right outcome for the service recipient according to that recipient’s values, preferences and lifestyle; and
- **Partnerships** – promoting collaborative practice.

Finally, the “Initial Aboriginal Early Years Strategic Framework” firmly supports the integration of culture in Aboriginal service delivery. This B.C. framework was created in 2008 with a vision of seeing “Aboriginal worldviews and the uniqueness of children, families and communities...respected, honoured and celebrated” (Gerlach, Gray Smith & Schneider, 2008). The Framework proposed seven principles to guide early years work among Aboriginal children in B.C.:

- Children and families are at the centre of all circles;
- Community: Self-determination & capacity;
- Programs and services will be rooted in Aboriginal worldviews, culture and language;
- Holistic wellness & strengths-based
- Programs and services are culturally safe, integrated & equitable

- Relationships are collaborative & respectful
- Shared accountability

These principles of cultural safety, along with those found in the literature review, are closely related to the guiding principles and “ways of being” that the VNFC APP participants articulated. The literature clearly demonstrates a range of evidence that suggests that these principles of cultural safety result in healthy outcomes, including “healing strategies, with safety as a cornerstone that work to move communities in crisis along the healing path toward emerging healthy communities” (Lane et al., 2002, as cited in Brascoupe, 2009).

Because the concept of “cultural safety” was first developed in relation to services delivered to Aboriginal peoples in a mainstream health-care setting, it is easy to see how, when translated into other areas of service delivery, Aboriginal organizations and Aboriginal-led initiatives are best positioned to be able to deliver services in a culturally-safe manner. What’s more, moving beyond cultural safety, an abundance of literature can be found stating the importance of returning to and revitalizing Aboriginal culture and practices as fundamental steps in creating vibrant, healthy Aboriginal communities, and healing Aboriginal communities in crisis:

Aboriginal people will not be able to find their way through to healing unless they are able to tell their stories in a safe and sacred space, something not possible to achieve in most medical offices. Supporting Native medical centres and healing circles will be necessary to close this circle of hurt and restore a “good mind” to Native peoples (Brant, 2009, as cited in Wesley-Esquimaux & Snowball).

A U.S. study reaffirms that “approaches that emphasize culture and history to empower a community... work the best within collectivists’ cultures that have experienced significant disempowerment, such as Native Americans/Alaska Natives” (Fialkowski et al., 2012). In the context of service delivery to Aboriginal families, children, communities and individuals, cultural safety seems to be an outcome of the guiding principles that VNFC operates under: respectful practices, strengths-based approaches to client/staff interactions, community-centered, flexible and adaptable policy and practices, and the injection of Indigenous culture, rituals and traditions into every aspect of the centre. These promising practices are evidenced throughout the literature of both mainstream and Aboriginal scholarship, in terms of serving both Indigenous and non-Indigenous communities.

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