

Pulse Check: Community Conversation - Brooks, AB

On May 15th, 2025, the Community Foundation of Southeastern Alberta (CFSEA), in support of the Brooks Community Services Collaboration held a community conversation involving service providers and community organizations serving Brooks, Alberta. This event was facilitated by Lauren Sanlav, the Vital Signs research and project coordinator at the CFSEA. The primary goal of this conversation was to identify the urgent needs and priorities of regional organizations and come up with action items to support these needs.

The discussions stemmed from the recent *Pulse Check Survey* conducted by the Community Foundation of Southeastern Alberta in March 2025, which asked community organizations and service providers across the region to identify three pressing needs they were facing. Two key topics emerged from the survey, which were the focus of the discussion.

Participant Engagement

Attendees participated in two topic discussions, rotating to share their insights. A total of 25 individuals were present, representing a diverse range of community organizations.

Topic 1: Support for Vulnerable Groups

Support for vulnerable populations refers to providing assistance, resources, and services tailored to the needs of groups who are at a higher risk of experiencing harm, disadvantage, or marginalization. These populations might include individuals facing poverty, homelessness, disability, elderly individuals, minorities, or those with limited access to healthcare and education. The support aims to improve their well-being, ensure equal opportunities, and protect their rights.

Topic 2: Addressing the Social Determinants of Health (Mental and Physical Health, Housing, Food Security)

Addressing the social determinants of health means taking action to improve these underlying conditions so that everyone has a fair opportunity to achieve optimal mental and physical health. This includes ensuring access to safe and affordable housing, reliable and nutritious food, quality healthcare, stable income, and supportive community networks. Health disparities and inequities often arise when these determinants are distributed unequally due to systemic issues such as poverty, discrimination, and lack of access to resources.

Topic 1: Supporting Vulnerable Populations

Questions

1. What are the most urgent needs of the vulnerable groups that you serve that are going unmet due to limited resources or capacity?
2. How have recent funding cuts affected programs that support immigrants, seniors, or people with disabilities in Brooks?
3. What should funders and decision-makers prioritize to ensure long-term, equitable support for these populations?

Urgent Need	Key Risks	Actions Needed for Change
Mental Health Supports	Long wait times, inadequate access to culturally responsive care.	Expand accessible, culturally competent mental health services; prioritize outreach to men and youth
Affordable Housing & Senior Care	Homelessness, unsafe living conditions, seniors unable to age in place	Invest in affordable housing, senior facilities, and supports for seniors with disabilities
Accessible Learning & Language Programs	Newcomers unable to integrate, children forced to translate, long waitlists for ESL classes	Increase funding for language and adult education; train service providers in plain language communication
Childcare & Family Supports	Families unable to afford basic needs, child development risks	Subsidize childcare; streamline access to child tax benefits and family supports
Inclusive Employment & Job Placement	Unemployment/underemployment, especially for TFW families and people with disabilities	Fund inclusive hiring programs; provide incentives and supports for employers
Transportation (Public & Regional)	Residents unable to access jobs, health care, or services	Develop and fund reliable public and regional transportation options
Programs for Children with Disabilities & Emerging Adults	Isolation, lack of available service providers for families with FSCD funding, increased vulnerability and risk as they age	Increased funding for organizations to provide disability support services for children (under 18), especially for families that are eligible for FSCD.
Sustainable, Long-Term Funding for Services	Service gaps, overloaded programs, high staff turnover, loss of effective initiatives	Commit to multi-year operational funding; avoid unnecessary reinvention; sustain proven programs

Topic 2: Addressing the Social Determinants of Health

Questions

1. How have recent changes impacted your organization's ability to address basic needs like housing, food, and healthcare?
2. Why are local organizations being expected to fill these systemic gaps, and what's at risk if this continues?
3. What would true wraparound support look like in our region, and what partnerships or system changes are needed to get there?

Urgent Need	Key Risks	Actions Needed for Change
Stable, accessible income supports (simpler reporting, less bureaucracy)	People losing income support due to complex reporting requirements; increased poverty and instability	Simplify income support application and reporting process, Adjust job search for rural realities, Restore local case manager support, Support clients with complex barriers
Preventive, not just emergency, organizational responses	Organizations forced into crisis mode, unable to provide long-term or preventive support	Fund and incentivize preventive, upstream programs; ensure stable, multi-year funding for community organizations
Accessible government supports (in-person, not just phone/online)	Vulnerable people (language/tech barriers) unable to access services; increased isolation and unmet needs	Restore in-person government services; provide interpretation and navigation support
Timely access to employment and settlement services	Longer wait times, unqualified job seekers, increased unemployment	Increase funding for employment/settlement counselors; expand training and job placement programs
Affordable, available housing	Increased homelessness; rising rental costs due to insurance hikes	Invest in affordable housing; regulate insurance/rental costs; support emergency housing for those fleeing violence
Sufficient food security and culturally appropriate food	Food banks at capacity; budget for food cut; immigrants' needs unmet	Restore food budgets for programs; fund culturally appropriate food initiatives; support local food banks

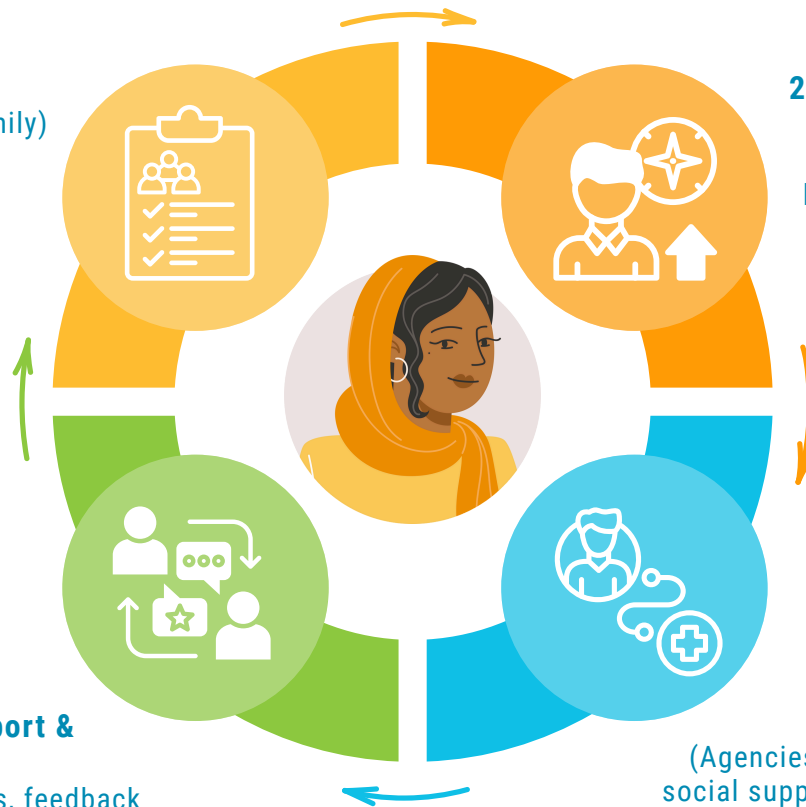
Urgent Need	Key Risks	Actions Needed for Change
Program stability and staff capacity (training, hours, travel)	Staff burnout, loss of expertise, reduced service hours; inability to travel to rural/remote communities	Fund full-time positions, training, and travel; ensure operational budgets meet regional service needs
Effective case management and navigation support	Individuals lost in the system; increased dependency and disengagement	Fund case management roles; build navigation and advocacy services within organizations
Systemic, not just individual, approach to health and well-being	Organizations filling systemic gaps with limited resources; risk of organizational collapse	Advocate for systemic reforms; invest in social determinants of health, not just acute care
Authentic, accessible evaluation and feedback mechanisms	Programs unable to demonstrate impact; youth and marginalized voices not heard	Use qualitative and participatory evaluation methods; involve clients in program design and assessment

Envisioning True Wraparound Support

Vision Statement

True wraparound support ensures that every individual and family can access the right help at the right time, without falling through the cracks. Services are coordinated, respectful, and responsive to each person's unique story and needs.

1. Assessment (Individual or Family)



2. Navigator/connector Assigned (A trusted guide who knows the system, warm handoffs)

4. Ongoing Support & Integration (Regular check-ins, feedback loops, adapting to changing needs)

3. Access to Services (Agencies, healthcare, education, social supports. people can access services without repeating their story or being bounced around)



Imagine a family navigating wraparound support in Brooks:

1. They complete a single form.
2. They are assigned a dedicated navigator.
3. They benefit from warm handoffs.
4. They access services seamlessly, without the need to recount their story multiple times or get transferred between services.

Envisioning True Wraparound Support

Theme	Insights / Recommendations
Assessment & Connection	<ul style="list-style-type: none"> • Begin with an individual or family assessment to address root causes. • Designate someone to connect families with services. • Provide warm transfers to clients, focusing on relationships and familiarity.
Collaboration & Coordination	<ul style="list-style-type: none"> • Foster community collaboration. • Appreciate community connections like interagency partnerships. • Maintain open lines of communication. • Address duplication of services due to lack of provider awareness.
Access & Eligibility	<ul style="list-style-type: none"> • Eliminate eligibility requirements where possible. • Use a universal application form to connect to available programs. • Increase access for people of all statuses. • Meet individuals where they are.
Mental Health & Social Supports	<ul style="list-style-type: none"> • Support employees and employers with mental health initiatives. • Enhance individual-level community engagement (integration, parenting, relationships). • Recognize difficulty in making connections.
System Navigation & Structure	<ul style="list-style-type: none"> • Appoint a government-funded hub coordinator. • Share information widely; create a client info hub. • Return to regional service provision, reversing provincial centralization.
Cultural & Generational Relevance	<ul style="list-style-type: none"> • Incorporate cultural and generational understanding into program delivery. • Understand that clients rely on support not just for themselves, but for families too.

Envisioning True Wraparound Support

Principle	What it means
Meet People Where They're At	Services adapt to individual/family needs, not the other way around
Universal Access	Remove eligibility barriers; one application connects to many programs
Relationship-Based Support	Warm handoffs, ongoing connection, and trust-building
Community Collaboration	Agencies, employers, schools, and government work together seamlessly
Flexible Funding & Reporting	Funders adapt to local realities and support what works, not just what's "innovative"
Information Sharing	Clear, accessible, and widely-shared info about all available services
Cultural & Generational Awareness	Programs reflect the diversity and lived experience of the community

Quotes:

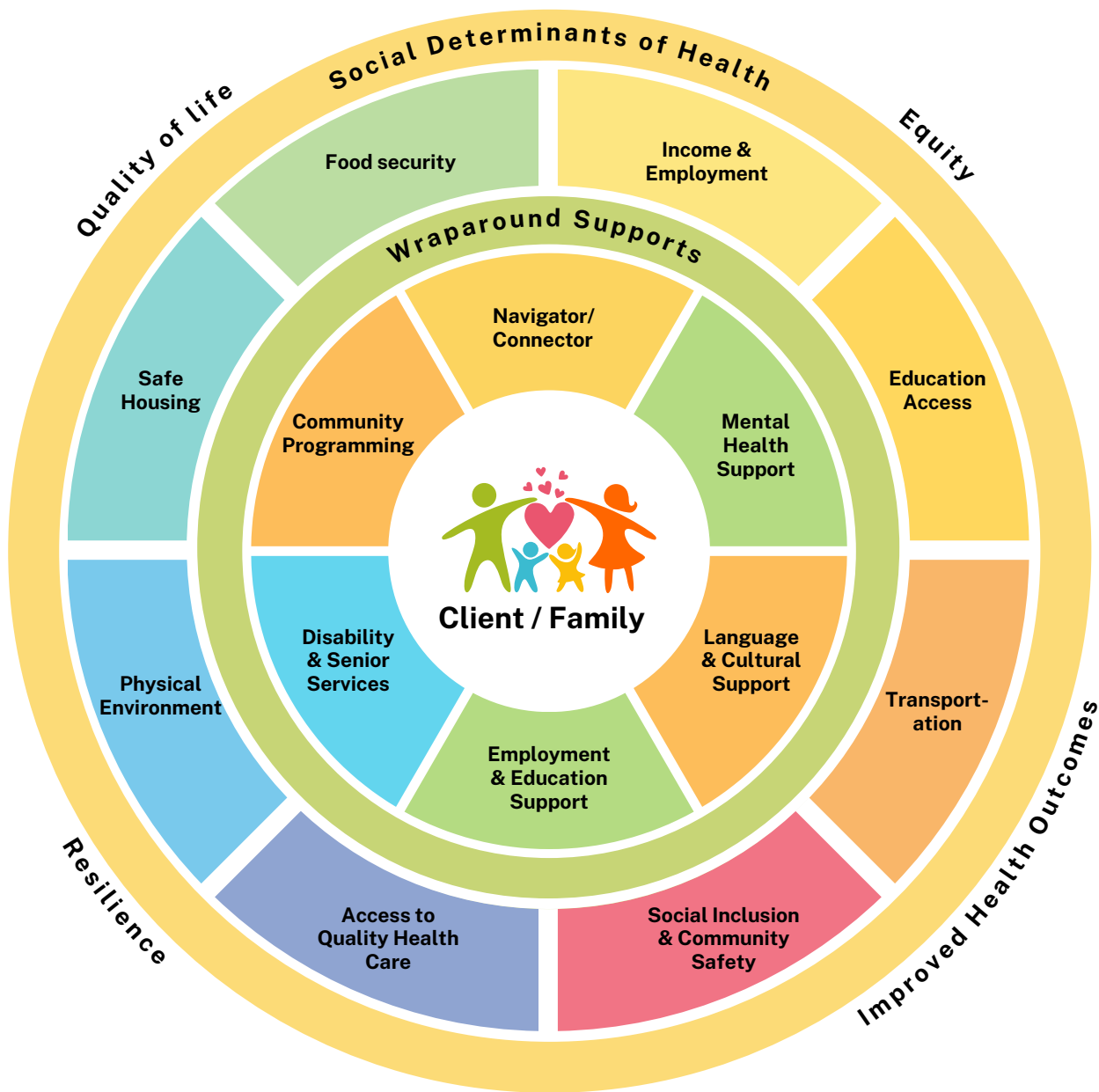
"Before referrals, it's crucial to confirm that clients can actually be referred to avoid discouragement if they are turned away. Educating clients about services can prevent them from bouncing between options."

"We should consult organizations about their needs and what is working well, while involving clients in identifying their own needs."

"We need to address unrealistic expectations, such as income support policies that take all earnings, and the burdensome paperwork associated with AISH."

Integrated Wraparound Support and SDOH Model

This integrated visual emphasizes that true health equity and improved outcomes are achieved when both individual supports and broader social determinants are addressed together, creating a reinforcing system of care and opportunity.



Addressing only immediate needs (like crisis mental health support or emergency housing) without tackling root causes (like poverty, discrimination, or lack of transportation) leads to short-term fixes rather than lasting health improvements.

System Change Recommendations

1. **Decentralize services to local and regional levels:** Ensure staff are familiar with local context and challenges in rural and small centers.
2. **Fund What Works:** Continue successful programs, don't force constant innovation.
3. **Reduce Paperwork:** Make reporting and applications simpler and more meaningful.
4. **Tailor Funding:** Move away from one-size-fits-all approaches.

Quotes:

"If we're expected to operate regionally, **why aren't we getting the support needed to travel** between communities? Vulnerable people can't rely on online services—especially with language and technology barriers. People want face-to-face help, and right now, we just can't meet that need."

"Funders need to allow **flexibility in guidelines**, understanding the complexities and variations between communities. What works in urban areas may not be effective for small to medium-sized towns."

The government prioritizes numerical data, but the **real impact lies in retention**. We need flexibility in reporting requirements, as these can create pressure to meet guidelines set by those who may not fully understand our daily experiences.

"Funders and government officials should **engage directly with organizations in Brooks** to understand the unique challenges we face, as Brooks is particularly diverse."

"An increasing number of individuals are **depending on social services**. Many find themselves in a constant state of emergency. Even our food bank shelves, which were once well-stocked, are now empty."

"Funders should continue to **support initiatives that have already shown success**, without pressuring organizations to innovate unnecessarily."

“What’s Needed” Checklist

Here are the action items suggested by participants.

Navigator/Hub Coordinator

- Appoint a central person or team to guide families.

Universal Application

- One-stop intake form for all services.

Open Communication

- Regular interagency meetings and information sharing.

Flexible Funding

- Multi-year, adaptable grants that reflect local needs.

Client-Centered Referrals

- Confirm eligibility before referring, and educate clients about what to expect.

Community Engagement

- Foster relationships, peer support, and integration at the individual level.

Education & Awareness

- For both service providers (on cultural diversity) and for youth (on the diversity of their peers).

Direct Funder & Government Engagement

- Invite officials to see local realities firsthand.

In Summary

Brooks organizations are calling for a shift to long-term, flexible, and locally-tailored support that prioritizes prevention, cultural competency, and continue building on either existing collaboration or new collaborations. Action is needed to address urgent needs, streamline access, and build a truly wraparound system that meets the diverse realities of the community.

Follow-up Question

Participants were encouraged to answer a question after the discussion to identify both short-term and long-term objectives. The majority of respondents suggested forming a local non-profit advocacy group to foster a unified voice. This group would serve as a central hub for addressing community issues, sharing resources, and amplifying the concerns of vulnerable populations.

Short-term Actions

- Establish a working group to formulate an action plan based on this discussion. **(x10)**
- Develop clear and reasonable solutions with timelines **(x7)**
- Staff/volunteer professional development opportunities **(x6)**
- Improve advertising for available funding **(x5)**

Long-term Actions

- Create a local non-profit advocacy group to promote a unified voice **(x16)**
- Reduce barriers for vulnerable groups **(x10)**
- Become a community that creates long-term solutions **(x3)**

Let's Transform These Insights Into Action

We've identified key challenges, and, more importantly, we've uncovered actionable solutions. Now is the time to move beyond conversation and embrace a new era of collaboration. The Community Foundation can play a pivotal role by:

- Coordinating and facilitating leadership meetings focused on specific action items, collaborations, and priority areas.
- Educating and advocating with funders and charities.
- Linking organizations with shared causes during the grant application process.