CALGARY'S MENTAL HEALTH + ADDICTION STRATEGY

Calgary's Mental Health Addiction Strategy and Action Plan

Five-Year Evaluation

EXECUTIVE SUMMARY

Context

In 2018, Calgary City Council passed a Notice of Motion directing Administration to convene and develop a mental health and addiction strategy for Calgary. In 2021, Council approved *Calgary's Mental Health and Addiction Community Strategy and Action Plan 2021-2023* ("the Strategy"), a community-led strategy designed to create hope and strengthen support for people, families and communities in Calgary.

Focus of evaluation

The City of Calgary's Demographics and Evaluation team within the Community Strategies Business Unit evaluated the Strategy and its implementation. The team reviewed key outcomes achieved and the process of change used to advance the Strategy between July 2018 and June 2023. Two main questions guided the evaluation: (1) What outcomes of Calgary's Mental Health and Addiction Strategy and Action Plan have been achieved to date? (2) To what extent have the systems and processes been implemented effectively?

The team used outcome harvesting methodology for the evaluation because of its ability to capture complex and dynamic systems change work and difficult-to-monitor development processes. The evaluation "harvested" 32 outcomes from the Strategy between the start of the development phase to the first three years of the implementation phase. The team engaged Individuals with direct knowledge of Strategy outcomes and initiatives in the substantiation process to verify and provide additional input.

Key evaluation findings over the five-year period

- The $42 million in investments to enhance 231 (156 unique) community programs and services has positively impacted addressing mental health and addiction-related issues affecting Calgarians.
- Community programs and services were effectively cross promoted through more than 1,000 partnerships within the funded organizations and more than 30 meetings attended by Strategy partners.
- Existing committees, task forces and groups clearly identified system gaps and opportunities.
- Eighteen cross-sector collaborative initiatives advanced to significantly break down system silos.
- Governance structure effectively set the groundwork for collaboration.
- Mental health and addiction funding processes improved significantly since 2018.
- Implementation processes incorporated inclusive practice principles.

Recommendations

Leadership group and implementation team members, funded community organizations and The City as the Strategy convener all identified lessons learned in the first three years of Strategy implementation. These learnings helped inform the following recommendations:

Recommendation 1 **–** Continue to invest in community mental health and addiction supports as the frequency, complexity, and rapidly changing mental health needs of Calgarians are increasing. This includes both programmatic and cross-sector collaborative investments.

Recommendation 2 **–** Narrow Strategy actions scope and expand Strategy partnerships. The nine actions with sub-actions are too broad and challenging for Strategy partners to address specific topic areas. Having named partners also creates barriers for interested non-named partners to contribute to the Strategy while also placing the burden on named organizations to fully implement a broad topic area with limited resources and staff capacity.

Recommendation 3 **–** The governance structure was effective in the early stages of strategy development and implementation, but now group roles and responsibilities need further refinement and clarification. Lived-experience representation is missing from Strategy groups. Grassroots, ethnocultural, and racialized organizations also need ways to participate beyond program and service delivery.

Recommendation 4 **–** Develop and implement ongoing data collection at the local level to provide better shared measurements so Strategy partners can understand Calgarians' mental health needs in more detail and whether Calgarians are accessing the right supports at the right times.

Conclusion

This evaluation highlights the Strategy outcomes achieved to date and the extent to which the systems and processes have been implemented effectively. Systems change work takes time. As the mental health and addiction needs of Calgarians continue to be a priority, this evaluation should help identify areas of success and areas needing more focus. With Council and partners' support, this iterative Strategy will continue to refine its goals to help improve the lives of Calgarians.

BACKGROUND

According to the Mental Health Commission of Canada (MHCC), mental health and addiction issues are complex. Addressing issues to achieve results involves multiple systems working in different sectors and jurisdictions. [1] In 2012, MHCC released *The Mental Health Strategy for Canada* and called for all levels of government leadership, including municipal, to transform the mental health system to better respond to mental health and illnesses of Canadians.

Calgary context

Concerns of rising crime, social disorder and drug overdoses grew in Calgary during the economic downturn prior to 2018. For instance, more Calgarians died from accidental fentanyl overdoses in 2017 than from violent crime and motor vehicle collisions combined.[2] During that time, Calgary had a comprehensive strategy for ending homelessness and for poverty reduction but no comprehensive strategy to address mental health and addiction. To remedy this and commit to the MHCC calls to action, in 2018, Council passed a motion for a mental health and addiction strategy, allocating $25 million over five years from the Fiscal Stability Reserve.

The work started with a panel discussion with Council led by academic researchers, as well as experts from Alberta Health Services, Calgary Board of Education, Calgary Police Service and community organizations. Panelists explained that Calgary's systems and organizations worked in silos while supporting individuals with mental health and addiction issues, and that even though Alberta Health Services is the provincial health authority that oversees and advances Alberta's mental health and addiction system, The City can play an important convenor role to break down those system silos. With this in mind, a group of Calgary-sector leaders participated in a Bloomberg Harvard City Leadership Initiative on cross-sector collaboration to address complex challenges. This resulted in a community-led stewardship group formed to guide mental health and addiction strategy development for Calgary.

In 2019 and 2020, City Administration also hosted engagement sessions with more than 80 individuals representing service providers, first responders, lived-experience Calgarians, peer support workers and City staff. Participants identified several improvement areas within Calgary's mental health and addiction system, including collaboration, accessing and navigating services, informal supports outside the system, stigma, and lack of awareness. Participants also identified a need for better connections between grassroots groups and more formally established organizations and services to better address mental health needs of Calgarians in their homes, schools, workplaces, and communities.

The expert panel discussions, cross-sector stewardship group and engagement sessions informed the Strategy to reflect diverse voices and perspectives. City Council officially approved Calgary's Mental Health and Addiction Community Strategy and Action Plan 2021-2023 in March 2021.

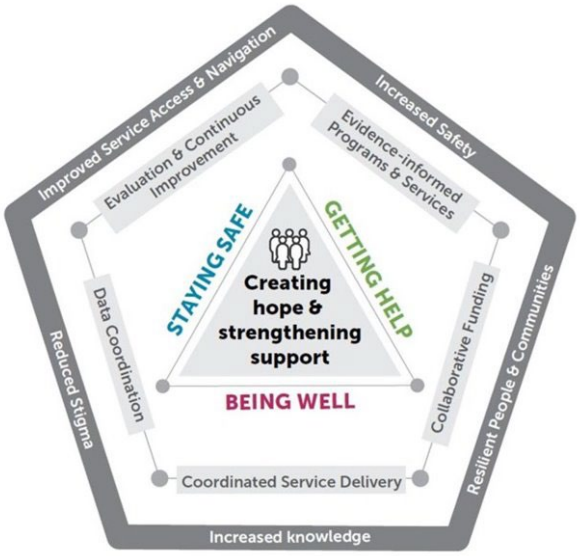
Figure 1: Calgary's Mental Health and Addiction Community Strategy and Action Plan

Strategy overview

The Strategy's goal is to create hope and strengthen support for everyone through three focus areas:

Being Well: Wellness at home, at school, at work, and in the community.
Getting Help: What you need, when, where and how you need it.
Staying Safe: Security at all times, especially in a crisis.

Figure 2: Strategic framework



In October 2021, a leadership group was established to provide cross-sector, collaborative guidance and strategic direction for the implementation of the Strategy. Leadership group members included representatives from Alberta Health Services, Calgary Board of Education, Calgary Police Service, The City of Calgary, the business sector and community organizations.

In February 2022, cross-sector partners formed Being Well, Getting Help, and Staying Safe implementation teams to co-ordinate service delivery and data, cross promote programs and services, and identify systems gaps and opportunities. The City maintained the Strategy's convener role.

The outer grey area in Figure 2 names the five long-term Strategy outcomes. Each long-term Strategy outcome identified population-level indicators to be monitored, measured and shared among Strategy partners to understand how systems change initiatives and actions were advancing the Strategy. See Appendix A for each strategic long-term outcome definition and their associated recent trends.

COVID-19 pandemic impact

On March 15, 2020, Calgary declared a state of local emergency due to the COVID-19 pandemic. The stress of uncertainty and change during the pandemic impacted the mental health of many Calgarians, especially those with pre-existing mental health and substance use issues. The pandemic also significantly disrupted and strained the healthcare and social services sectors and their workers, which affected how Calgarians accessed mental health and addiction services.

> The latest Citizen Perspectives Survey reported between October 2021 and November 2022, almost half (46 per cent) of Calgarians on average thought their mental health was worse because of the pandemic. Moreover, an average of 35 per cent of Calgarians saw COVID-19 as a major threat to their mental health during that same reporting period.
>
> *Source: City of Calgary. (Nov 2022). 2022 Citizen Perspectives*

The fact that the Strategy was developed and implemented within the pandemic context cannot be underestimated. For instance, as the pandemic shifted Calgarians' mental health needs, it also influenced how the funding frameworks within the strategy evolved.

EVALUATION METHODOLOGY

The City's Demographics and Evaluation team within the Community Strategies Business Unit internally evaluated the Strategy and its implementation to examine key outcomes achieved and the extent to which systems and processes were effectively implemented between July 2018 and June 2023.

Evaluation approach

Informed by utilization-focused evaluation and outcome mapping, outcome harvesting is an evaluation tool used to manage knowledge and learn from complex, multi-actor processes.[3] The approach considers that to generate deep and durable impact a variety of system actors must change behaviours. Commonly used as an evaluation approach to capture complex collective impact initiatives or strategies, outcome harvesting involves a reflective process of collection information about what changed, for whom, when, where and why it matters, and then works backwards to determine how the initiative or strategy contributed to those changes.[4]

Outcome harvesting process

Step 1 – Evaluation design: Outlined evaluation approach, established scope of work, determined evaluation questions, identified roles and responsibilities, and outlined evaluation timeline.

Step 2 – Harvest data: Collected and reviewed all documents related to the development, implementation, and intended and unintended outcomes of the Strategy (i.e., Calgary City Council meetings minutes, leadership group, implementation teams, and Community Investment Table meetings minutes, City Administration documents and outcomes reports, and websites for partner initiatives). Partners reviewed and provided input on outcome statements drafted based on the data collected.

Step 3 - Substantiation: Engaged with more than 20 individuals who had direct knowledge about achievements and their relationships to Strategy initiatives and outcomes. Verified and revised outcome statements. Identified significance of outcome statements, and the Strategy's contributions to outcomes.

Step 4 - Analysis and interpretation: Analyzed outcome statements and grouped outcomes into three main areas. Mapped outcomes to understand change processes that occurred before and during Strategy implementation.

Step 5 - Report: Summarized Strategy outcomes achieved and how the Strategy contributed.

Evaluation questions

Two main questions guided the evaluation:

1. What outcomes have been achieved to date as a result of Calgary's Mental Health and Addiction Strategy and Action Plan?

a. What programmatic outcomes have been achieved?
b. What cross-sector collaborative initiative outcomes have been achieved?

2. To what extent have the systems and processes been implemented effectively?
   a. How effective is the implementation structure in advancing the Strategy?
   b. How effective is the funding eco-system?
   c. How can the above processes and structures be improved?

FINDINGS

The outcome harvesting methodology identified 32 outcomes for description and substantiation. Figure 3 provides a summary of outcomes. All outcomes were analyzed and grouped based on how they connect to each other to advance the Strategy objective. Overall, outcomes were categorized in three main areas:

1. Enhance capacity of programs and services.
2. Advance cross-sector collaborative initiatives.
3. Improve system and sector processes.

Figure 4 summarizes the Strategy's contribution, key partners involved, and how change occurred to advance the Strategy objective and long-term outcomes.

1. Enhance capacity of programs and services

Evaluation question 1a: What programmatic outcomes have been achieved?

The first category of outcomes enhanced programs and services that support Calgarians to Be Well, Get Help, and Stay Safe by investing in community organizations delivering mental health and addiction programs and services, and by cross promoting them in the community.

Between 2019-2022, $42 million in funding was allocated to 231 (156 unique) programs and services. Reports from these programs and services indicate the investments had a positive impact on addressing the mental health and addiction-related issues affecting Calgarians. See Appendix B for details on the types of programs and services, outputs by year, outcomes, and contribution to strategic long-term outcomes.

Being Well participant story

In March 2016, I entered long-term recovery for mental health and substance use. I quickly learned I needed a multifaceted approach to move forward. Part of this meant building meaningful connections and joining supportive recovery communities. A local agency I volunteered with referred me to the Canadian Mental Health Association. I immediately experienced the power of peer support from their trainers and the empowerment of sharing lived experience with fellow participants. Not only did I enroll in a couple more classes, I was also accepted into the School of Peer Support and graduated in the fall of 2018. By 2019, I became a casual peer support worker, bringing my lived experience not only into the Welcome Centre, but also into Recovery College. Through my work, I have had the privilege of sharing my lived experience in a multitude of Recovery College courses. I get to bring my story of hope, resilience and belonging to others.

- Peer Support Programming and Recovery College Participant and staff

Getting Help participant story

A client involved with the Healing Lodge for three years has had a significant decrease in symptoms and has increased her overall resilience capacity. She has faced significant problems such as involvement with Child and Family Services, addictions, complex trauma, and suicidality. She continues to demonstrate courage in the face of adversity, advocates for her needs and is diligent in nurturing her well-being. Her story highlights the healing that has occurred for her through counselling, community recovery support, and cultural ceremonies. The healing that has taken place for this client is not only a gift in her own life, but it also ripples out to healing for her children and loved ones.

- Miskanawah Healing Lodge staff

Staying Safe participant story

This past December, one of our outreach teams working the 211 Program received a call about a mother and her 13-year-old daughter downtown asking where to find shelter. A random passerby directed them to Alpha House's shelter but another concerned citizen seeing the two outside in the freezing cold late at night and visibly in distress intercepted before they made it to the shelter doors. It was the beginning of the first major cold snap this past winter and nearing thirty below. The mother and daughter were political refugees, originally from Columbia, who had landed in Calgary via Montreal. They had not been in the city three hours before someone spotted them and called 211 for support. That night, the team found them emergency shelter at Inn From The Cold and contacted the police to be sure their immigration team was on top of finding out how to better help them longer term.

- Human-centered Engagement and Liaison Partnership Staff

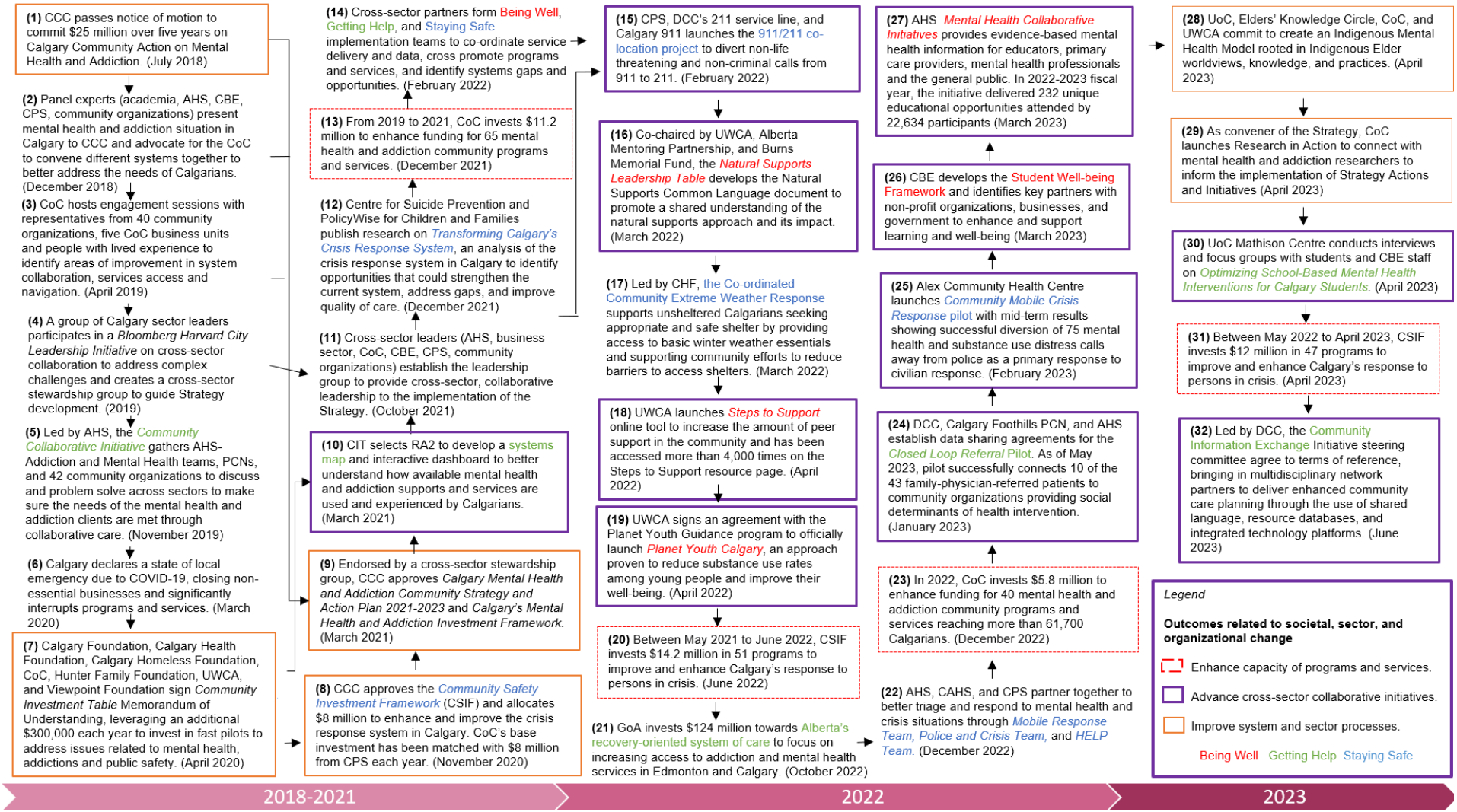
In addition to investments, organizations were encouraged to partner with others when planning or implementing programs, which could range from sending referrals to establishing formal agreements. Between 2019 and 2022, funded organizations reported more than 1,000 partnerships[5]. Implementation teams held 32 meetings[6] which helped members to learn each organization's programs and services offerings and then leverage these learnings to meet Strategy outcomes.

2. Advance cross-sector collaborative initiatives

Evaluation question 1b: What cross-sector collaborative initiative outcomes have been achieved?

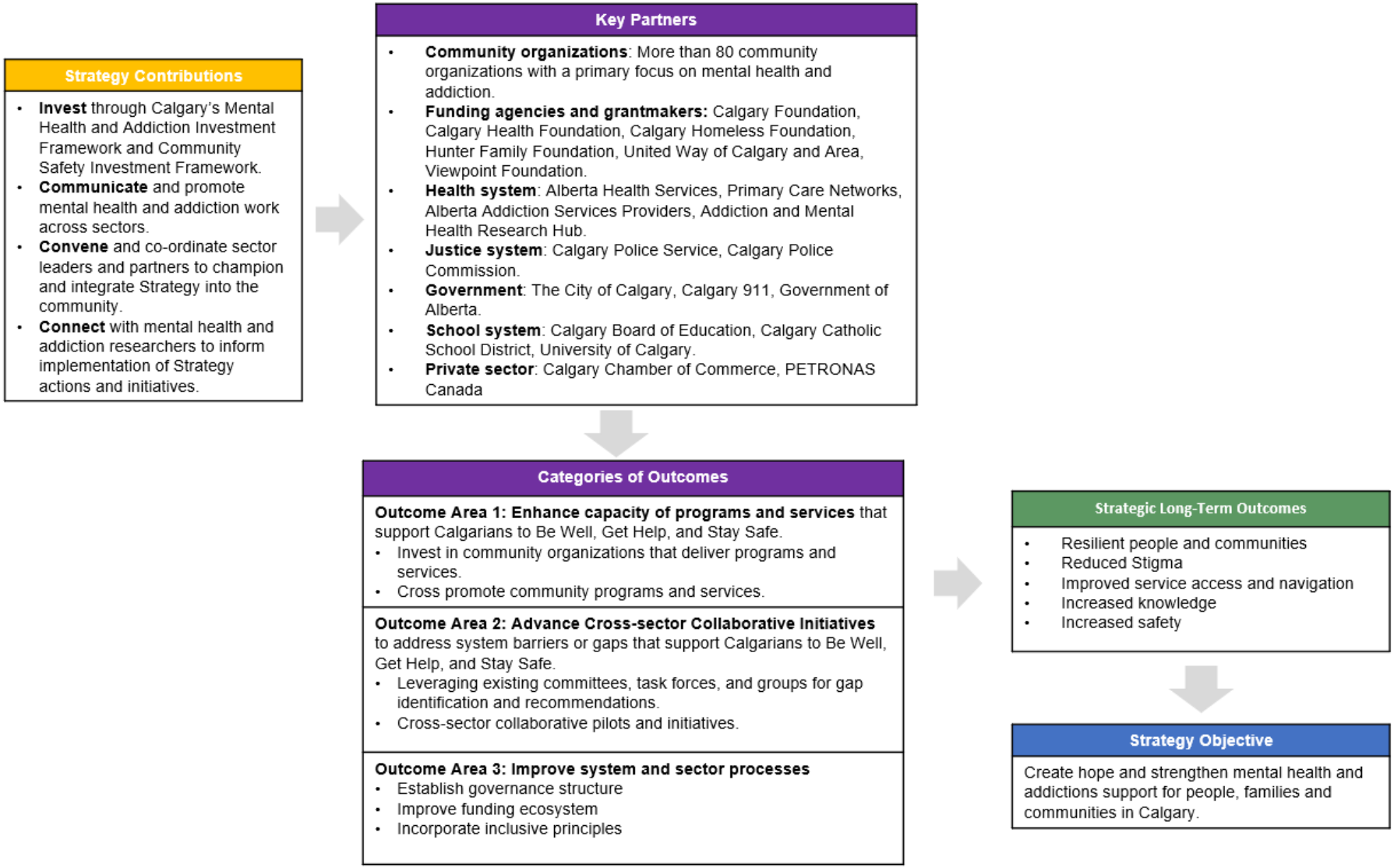
The second outcomes category is advance cross-sector collaborative initiatives to address the systemic barriers or gaps that support Calgarians to Be Well, Get Help, and Stay Safe. Systems gaps were identified and addressed through Strategy actions (See Appendix C).

Figure 3: Summary of outcomes achieved from July 2018 to June 2023



See Appendix D for a list of the acronyms used in Figure 3.

Figure 4: Change strategy showing how change happened to advance the Strategy objective.

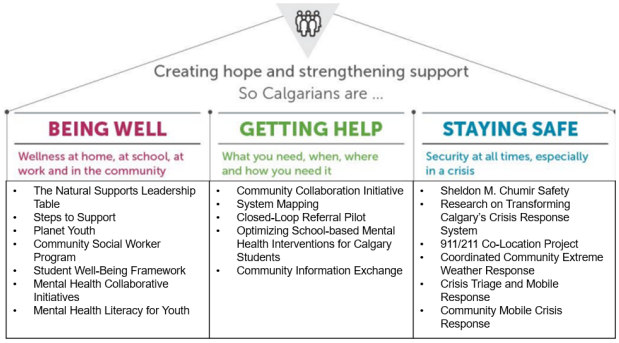


For a list of community organizations mentioned in Figure 4, please see Appendix E.

Systems gaps were identified by first leveraging learnings from existing committees, task forces and groups. Expert panel discussions, the cross-sector stewardship group, and engagement sessions identified several systems gaps and areas for improvement. The specific gaps and opportunities were then grouped into focus areas (Being Well, Getting Help, and Staying Safe) and actions.

In total, the Strategy helped advance 18 cross-sector collaborative initiatives (see Figure 5) significant in breaking down system silos. Strategy partners contributed to the description and outcomes of the 18 cross-sector collaborative initiatives. Details can be found in Appendix F.

Figure 5. 18 cross-sector collaborative initiatives summary by focus area.



3. Improve system and sector processes

Evaluation question 2a: How effective is the implementation structure in advancing the Strategy?
Evaluation question 2b: How effective is the funding eco-system?

The third outcomes category outcomes was to improve system and sector processes by creating governance structure as groundwork for collaboration, improving the funding eco-system, and incorporating principles of inclusive implementation practices.

The greatest success in the implementation process was establishing the governance structure as groundwork for collaboration. This included creating a terms of reference for the leadership group and a commitment to working together as well as; co-ordinating service delivery and data, cross promoting programs and services, and identifying systems gaps and opportunities for implementation teams. In April 2023, Research in Action launched as a pathway between Strategy partners and researchers to collaborate and connect to inform the implementation of Strategy actions and initiatives. To date, Research in Action has connected with more than 15 research projects.

A changing funding environment meant that different investment approaches to mental health and addiction were used from 2018 to 2023. The City and its partners committed to several investment streams to address mental health and addiction, including:

- *Prevention Investment Framework with Mental Health and Addictions Lens* - $11 million from The City of Calgary (2019 to 2021)
- *Community Investment Table* – A pool of designated funds leveraged an additional $50,000 annually from major funders in Calgary including Calgary Foundation, Calgary Health Foundation, Calgary Homeless Foundation, The City of Calgary, Hunter Family Foundation, United Way of Calgary and Area, and Viewpoint Foundation. (2020 to present)
- *Community Safety Investment Framework* - $16 million annually from The City of Calgary and Calgary Police Service (2021 to present)
- *Calgary's Mental Health and Addiction Investment Framework* - $14 million from The City of Calgary (2021 to present).

Significant learnings and improvements have been realized in how the mental health and addiction system has been funded in Calgary. For instance, investing in fast pilot projects to find new solutions for Calgarians struggling with mental health and addiction challenges was a significant improvement. A new focus area at the time, funding fast pilots allowed for existing and new organizations to test out innovative, people-centered, data-driven ideas. Targeted investments also helped improve the mental health and addiction funding ecosystem in Calgary by filling the system gaps identified in the Strategy. Lastly, the collaborative nature of the funding processes has reduced the administrative burden on organizations when meeting their full resource requirements while strengthening sector knowledge and decision-making among funding partners.

The Strategy's core is that it is community led. Engagement sessions held when the Strategy was created ensured it accurately reflected and incorporated community voices and people with lived experiences. Strategy investment and implementation decisions were guided by equity-based principles to ensure culturally and racially responsive services and to remove systemic barriers. For instance, In April 2023, the University of Calgary, Elders' Knowledge Circle, The City of Calgary, and United Way of Calgary and Area committed to creating an Indigenous Mental Health Model rooted in Indigenous Elder worldviews, knowledge, and practices.

RECOMMENDATIONS

Evaluation question 2c: How can the processes and structures be improved?

In the first three years of Strategy implementation, leadership group and implementation team members, funded community organizations and The City as Strategy convener learned several lessons that helped inform the following recommendations:

Investment

Mental health and addiction supports continue to be in high demand due to the frequency, complexity, and rapidly changing mental health needs of Calgarians. Community mental health and addiction programs and services, including place-based and culturally appropriate services in mental health and addiction, need continued investment commitments in cross-sector collaboratives as systems change work often takes many years to plan, develop and implement.

Recommendation 1 - Continue to invest in community mental health and addiction supports. This includes programmatic and cross-sector collaborative investments.

Strategy actions

The Action Plan has nine actions and each action is further divided into sub-actions with named partners responsible for implementing each. Those implementing the Strategy have provided feedback that the action plan is too broad and very challenging to implement simultaneously. While having named partners was useful in identifying roles and responsibilities, it created barriers for non-named partners also interested in contributing to the Strategy. It also placed the burden on the named partners to fully implement a broad topic area, often with limited resources and staff capacity.

Recommendation 2 - Narrow Strategy actions scope and expand Strategy partnerships.

Governance

The Strategy is supported by a leadership group and implementation team of cross-sector partners. While the governance model was successful in enabling co-ordination, integration, and setting the groundwork for sector collaboration, further refinement and clarification of Strategy group roles and responsibilities is necessary. A power struggle between the leadership group and implementation teams needs to be addressed and more discussions between groups is desired. Community feedback identified that Strategy groups are missing lived experience representation and pathways need to be created for grassroots, ethnocultural, and racialized organizations to participate beyond program and service delivery.

Recommendation 3 – Continue to refine governance structure to clarify group roles and responsibilities. Create pathways for lived experience representation as well as grassroots, ethnocultural, and racialized organizations to participate beyond program and service delivery.

Evaluation

While some population-level data exists at the Calgary level to demonstrate collective accountability to shared outcomes, a data gap in understanding Calgarians' mental health needs in more detail remains. When the Strategy was developed, the initial plan was to utilize population-level data from sources like Statistics Canada and the Canadian Institute for Health Information. Unfortunately, data from these sources are only collected every two to five years and municipal-level data are very limited.

Developing and implementing ongoing data collection at the local level will better help inform Strategy partners, service providers, decision makers and community groups about the mental health needs of Calgarians and whether appropriate programs and services are meeting those needs.

Recommendation 4 – Develop and implement ongoing data collection at the local level to provide shared measurements for Strategy partners to better understand Calgarians' mental health status in more detail, and whether and how Calgarians are accessing the right supports at the right time.

CONCLUSION

Between 2018 and 2023, the Strategy has made significant improvements in the mental health and addiction system in Calgary by bringing different systems together. This evaluation highlights the outcomes achieved to date as a result of the Strategy and the extent to which the systems and processes have been implemented effectively. Systems change work takes time. As the mental health and addiction needs of Calgarians continue to be a priority, this evaluation will act as a guide to help identify success areas and areas needing more focus. The Strategy is iterative and will continue to refine its goals to help improve the lives of Calgarians with the support of Council and partners.

APPENDIX A – STRATEGIC LONG-TERM OUTCOMES, DEFINITIONS AND TRENDS

Mental health and addiction data collection exists at the national and provincial levels through organizations such as Statistics Canada and the Canadian Institute for Health Information. Unfortunately, these data are only collected every two to five years and very limited municipal-level data are available. In Calgary, mental health is a topic measured occasionally as an embedded category within the broader quality of life or well-being surveys. While these mental health and addiction measures provide an indication of the mental health needs of Calgarians, many factors outside the Strategy contribute to these indicator trends. For instance, the impact of the pandemic made it difficult to evaluate and measure the initial strategic, long-term outcomes of the Strategy, as mental health indicators for the Calgary population were severely disrupted.

1. **Resilient people and communities** refers to an increase in the ability of Calgarians to recover from difficult times. Extensive research shows natural supports in communities (e.g., individuals, organizations, groups, businesses, and others) promote a sense of belonging and connectedness which help people better cope with stress. Statistics Canada shows more Calgarians feel as though they belong to their local communities, from 67.6 per cent of Calgarians in 2015-2016 to 68.4 per cent of Calgarians in 2021-2022.[7] More recently in 2022, a Calgary Foundation survey found 80 per cent of Calgarians report a healthy sense of belonging.[8]

2. **Reduced stigma** addresses the complex social process that aims to exclude, reject, shame and devalue groups of people based on mental health and addiction. Consequences of mental illness stigma can include housing instability, decreased mental health and difficulty gaining employment. The stigma attached to mental illness often delays or prevents people from seeking the help they need. Research shows that talking about mental health can increase one's well-being and the likelihood to seek help. In 2021, a survey completed by RA2 found 87 per cent of Calgarians who have experienced mental health and/or addiction issues say they have discussed their concerns with someone.[9] Currently, no year-over-year trend measure exists for this indicator.

3. **Improved service access and navigation** refers to improving service co-ordination and integration between people experiencing mental health challenges and social supports that can help them. This will help Calgarians get client-centered care appropriate for their needs faster than before. One way to understand whether people are accessing mental health and addiction supports is to understand how many people are not accessing supports. In 2021, Calgary Foundation Vital Signs survey found 30 per cent of Calgarians do not have access to mental health services or supports.[10] A 2021-2022 RA2 survey showed 39 per cent of Calgarians have not accessed mental health supports, with cost identified as the biggest barrier to access.

4. **Increased knowledge** ensures Calgarians know where to get help for mental health challenges, substance use and addiction issues when needed. People often do not get the help they need because they don't know where to start. Letting Calgarians know how to access mental health and/or addiction supports increases the likelihood of them seeking appropriate supports when needed for themselves or their loved ones. RA2 survey found that in 2021-2022, 50 per cent of Calgarians think information about mental health and addiction supports is either very or somewhat easily available.[11] Currently, no year-over-year trend measure exists for this indicator.

5. **Increased safety** ensures Calgarians get the help they need when in crisis, including supports to prevent or lessen future crises. If mental health and addiction services are available and easily accessible when needed, early intervention will reduce the number of people in mental health crisis and who require emergency services. The number of drug poisoning deaths in Calgary helps to understand addiction challenges in the city. According to Government of Alberta Substance Use Surveillance data, the number of drug poisoning deaths in Calgary has increased from 274 drug poisoning deaths in 2017, to 482 drug poisoning deaths in 2022.[12] The trend started to significantly increase when the COVID-19 pandemic started.

APPENDIX B – SUMMARY OF INVSTED PROGRAMS AND SERVICES

Between 2019-2022, $42 million in funding was allocated to 231 (156 unique) programs and services. Table 1 and Table 2 summarize the types of programs and services, outputs by year, outcomes, and contributions to the five strategic long-term outcomes. Being Well and Getting Help programs were funded under the Prevention Investment Framework with Mental Health and Addictions Lens and under Calgary's Mental Health and Addiction Investment Framework, while Staying Safe programs were funded under the Community Safety Investment Framework.

Between 2019 and 2022, the number of individuals served has been steadily increasing in all funding streams. This could be due to programs being more established and therefore are able to serve more individuals, or the increase could suggest the demand for mental health and addiction programs and services in the community continues to grow.

Table 1: Summary of types of programs, outputs by year, and indicators by focus areas of Being Well and Getting Help.

Focus area	Program types	Outputs (2019) $3M invested	Outputs (2020) $4.2M invested	Outputs (2021) $ 4M invested	Outputs (2022) $4.8M invested	Outcomes (2022)	Strategic long-term outcomes
Being Well	Awareness-raising activities (i.e. educational workshops, information sessions, campaigns) Capacity building (i.e. Mental training for organizations, communities) Group or peer support (i.e. community events, group outings)	8 programs 3,688 unique individuals 10,115 contacts 88 partnerships	23 programs 3,344 unique individuals 19,958 contacts 175 partnerships	21 programs 4,110 unique individuals 25,632 contacts 97 partnerships	18 programs 6,358 unique individuals 34,244 contacts 144 partnerships	• 83% of participants reported a strong sense of community and belonging. • 82% of participants reported a strong social support or availability of natural supports. • 80% of participants reported improving their ability to cope with stresses and strains of everyday life. • 82% of participants reported increased opportunities to connect within their communities. • 97% of participants reported an increased understanding of how to support their family, friends, and neighbours who are experiencing mental health concerns.	Resilient people and communities Reduced stigma Increased knowledge
Getting Help	Individual participant support (i.e. counselling, therapy sessions, culturally specific support) Group or peer support (i.e. cultural sharing circles, group therapy sessions) System navigation (i.e. referrals, collaborations among organizations)	11 programs 1,844 unique individuals 16,555 contacts 194 partnerships	24 programs 3,647 unique individuals 32,425 contacts 169 partnerships	15 programs 4,257 unique individuals 27,412 contacts 194 partnerships	13 programs 7,261 unique participants 13,855 contacts 47 partnerships	• 87% of participants reported they improved their knowledge about how to access help for mental health and addiction issues when needed. • 85% of participants reported improved access to mental health and addiction services through co-ordinated points of access. • 92% of participants experiencing mental illness who accessed formal mental health and addiction support reported their needs were met. • 88% of participants reported improved access to mental health and addiction supports due to improved participant care with shared data.	Improved service access and navigation Increased knowledge

Table 2: Summary of types of programs, outputs by year, and indicators by focus area of Staying Safe.

Focus area	Program types	Outputs (2021-2022) $14M invested	Outputs (2022-2023) $12M invested	Outcomes (2022-2023)	Strategic long-term outcome
Staying Safe	Immediate interventions and connection to appropriate emergency or community responders Wrap-around care and system navigation Crisis counselling Peer support services	51 programs 16,065 unique individuals 134,304 contacts	47 programs 28,598 unique individuals 144,265 contacts	• **55% of CSIF-funded programs helped to improve crisis triage** - Divert individuals in crisis to receive appropriate supports in the community, rather than police apprehension or unnecessary health-care use) • **49% of CSIF funded programs help to integrated case management** - Collaborative efforts between organizations and programs to provide integrated care for their clients who are experiencing crisis. • **40% of CSIF funded programs helped to increase availability of 24/7 non-emergency support and outreach services** - Expand existing program operations that results in reduced wait times for clients and meet the high demands of services. • **4% of CSIF funded programs helped to increase capacity of support networks** – Provide skills and service awareness of family, friends, and neighbours to intervene before an individual reaches the point of crisis. • **15% of CSIF funded programs helped to increase access to community and peer support programs** - programs that are diverse, trauma-informed, barrier-free, culturally relevant, and includes lived experience. • **4% of CSIF funded programs helped to increase access to court diversion options -** Alternatives to the traditional justice system to decrease contacts with police.	Increased safety

APPENDIX C – NINE STRATEGIC ACTIONS, BY FOCUS AREA

BEING WELL Wellness at home, at school, at work and in the community	GETTING HELP What you need, when, where and how you need it	STAYING SAFE Security at all times, especially in a crisis
1. Help communities to become places where all people belong and support each other 2. Share information in schools and in the community to help people understand what mental health and addiction are and how to support themselves and others 3. Promote approaches to positive mental health in workplaces	4. Establish a coordinated network of mental health and addiction services so that people can easily get the help they need when they need it 5. Transform a system of early access to mental health and addiction services through schools 6. Transform a system of early access to mental health and addiction supports and services through workplaces 7. Building capacity of local organizations to meet the mental health and addiction needs in the community through convening around common actions.	8. Strengthen existing crisis supports 9. Transform how to respond to people and families in crisis and prevent future crises.

APPENDIX D – GLOSSARY OF ACRONYMS FOR SUMMARY OF OUTCOMES ACHIEVED FROM JULY 2018 TO JUNE 2023

Acronym	Organization
AHS	Alberta Health Services
CBE	Calgary Board of Education
CAHS	Calgary Alpha House Society
CCC	Calgary City Council
CHF	Calgary Homeless Foundation
CIT	Community Investment Table
CoC	City of Calgary
CPS	Calgary Police Service
CSIF	Community Safety Investment Framework
DCC	Distress Centre Calgary
GoA	Government of Alberta
HELP	Human-Centered Engagement and Liaison Partnership
MHF	Mental Health Foundation
PCN	Primary Care Networks
UWCA	United Way of Calgary and Area
UoC	University of Calgary

APPENDIX E – LIST OF COMMUNITY ORGANZATIONS

Aboriginal Friendship Centre of Calgary

Action Dignity

Alberta Caregivers Association

Alberta Mentoring Partnership

Alberta Northern Spirit Foundation-Wholistic Community Development

Alberta Recreation and Parks Association

Alexandra Community Health Centre

Antyx Community Arts Society

Autism Calgary Association

BeTheChangeYYC

Big Brothers Big Sisters Society of Calgary and Area

Buds in Bloom

Burns Memorial Fund

Calgary & Area Child Advocacy Centre

Calgary Alpha House Society

Calgary Catholic Immigration Society

Calgary Counselling Centre

Calgary Downtown Association

Calgary Drop-In & Rehab Centre Society
Calgary Drug Treatment Court Society

Calgary Health Foundation
Calgary Homeless Foundation

Calgary Immigrant Women's Association

Calgary John Howard Society

Calgary Korean Women's Association

Calgary Public Library Foundation

Calgary Reads (An Early Literacy Initiative) Society

Calgary Seniors' Resource Society

Calgary Towhid Centre

Canadian Mental Health Association - Calgary Region

Carya Society of Calgary

Centre for Sexuality Society

Centre for Suicide Prevention

Closer to Home Community Services Society

CUPS Calgary Society
Distress Centre Calgary

ECSSEN Career School

Enviros Wilderness School Association

EthioCare

Families Matter Society of Calgary

Fear Is Not Love Society

Federation of Calgary Communities
Hull Services

Immigrant Outreach Society

Inn From the Cold Society

Jewish Family Service (Calgary)

Kerby Assembly
Kindred Connections Society

McMan Youth, Family and Community Services Association

Miskanawah Community Services Association

MPC Foundation

National Zakat Foundation

Next Step Ministries

Nisa Homes - National Zakat Foundation

Northeast Addiction and Mental Health Centre for Holistic Recovery

Oxford House

Peer to Peer Labs Ltd.

PolicyWise for Children and Families

Pregnancy, Infant & Child Loss Support Centre

Punjabi Community Health Services Calgary Society

RESET Society of Calgary
Rotary

Sagesse Domestic Violence Prevention Society

Siksika Family Services

Skipping Stone Scholarship Foundation

Société de la petite enfance et de la famille du sud de l'Alberta

SORCe

The Calgary Between Friends Club - Fun & Fellowship for Disabled Youth

The Canlearn Society for Persons with Learning Difficulties

The Colour Factor Ltd.

The Healing Centred Cooperative

The Immigrant Education Society

The Mustard Seed Society

The SHARP Foundation (Society Housing AIDS Restricted Persons)

Trellis Society for Community Impact

Umoja Community Mosaic

Vecova Centre for Disability Services and Research

Vibrant Communities Calgary
Wood's Homes

12 Community Safety Initiative Society

1255404 Alberta Ltd. Operating as Calgary Foothills Primary Care Network

APPENDIX F – DESCRIPTION AND OUTCOMES OF THE 18 CROSS-SECTOR COLLABORATIVE INITIATIVES

Being Well initiatives

Much of the Being Well work already exists in the community. The Strategy helped amplify and promote the work across sectors. The following section describes how Being Well initiatives contribute to the strategic long-term outcomes of resilient people and communities and reduce stigma.

The Natural Supports Leadership Table
Lead: United Way of Calgary and Area, Alberta Mentoring Partnership, and Burns Memorial Fund
Co-chaired by the United Way of Calgary and Area, Alberta Mentoring Partnership, and Burns Memorial Fund, the Natural Supports Leadership Table guides the natural support work happening in Alberta through enhanced communication, co-ordination, and alignment.

In March 2022, the Natural Supports Leadership Table developed the Natural Supports Common Language document for Alberta funders, policy makers, helping professionals, and other community members to enable a shared understanding of the natural supports approach and its impact. Having a strong alignment to Strategy Action 1 (help communities to become places where all people belong and support each other), representatives from the Strategy were part of the working group that developed it and it can be found on the Connections First website.

Steps to Support
Lead: Social Impact Lab and United Way of Calgary and Area
In April 2022, United Way of Calgary and Area launched the Steps to Support online tool to increase peer support in the community. The tool equips individuals with the language of support, builds competencies and confidence, reduces fear around mental health conversations, and removes the stigma associated with mental health concerns. Finding practical tools to manage mental health can lead individuals to experience improved relationships, increased productivity, and a more supportive environment overall.

The tool has been accessed more than 4,000 times on the Steps to Support resource page to date. Having a strong alignment to Strategy Action 1 (help communities to become places where all people belong and support each other), representatives from the Strategy were part of the process in developing the tool.

Planet Youth
Lead: United Way of Calgary and Area
On April 25, 2022, United Way of Calgary and Area signed an agreement with the Planet Youth Guidance Program to officially launch Planet Youth Calgary, an approach proven to reduce substance use rates and improve well-being among young people. Planet Youth includes a parallel Indigenous approach to meet the unique needs of Indigenous youth. Representative of the Strategy participated in the Planet Youth planning sessions due to its strong alignment to Action 1 of the Strategy. Much of the Planet Youth activities are ongoing and significant progress is being made to implement the approach in Calgary.

As of July 2023, the Planet Youth Working Committee selected four communities (Forest Lawn, Saddle Ridge, Shawnessy and Thorncliffe/Huntington Hills) to implement a Planet Youth pilot. A survey will be distributed in Q1 2024 to all Grade 10 youth in eight Calgary high schools. The results will be available to share by Q2 2024.

Community Social Worker Program
Lead: The City of Calgary
The City of Calgary has community social workers (CSWs) in more than 20 neighbourhoods across Calgary. CSWs are assigned to neighbourhoods where the greatest opportunity to create positive social change with community members exists. In 2022, the Community Social Worker Program assigned a community social worker liaison to the Strategy to better align the program's work with the Strategy actions and initiatives.

The community social worker liaison helped inform the Strategy as to how existing efforts in communities are being leveraged to advance strategic long-term outcomes and to avoid duplication. In 2022, more than half of community social worker activities aligned with the Being Well focus area. These activities included community connector model, demographic-based groups, human libraries/talent sharing, and building natural supports through creativity to foster social inclusion at the neighbourhood level.

Student Well-Being Framework

Lead: Calgary Board of Education

In March 2023, the Calgary Board of Education developed the Student Well-Being Framework and identified key partnerships with non-profit organizations, businesses and government organizations to enhance and support student learning and well-being. The relationship among health determinants, educational environments and social contexts means that intentional actions to promote well-being must be a focus – specifically a preventative, comprehensive school health model. By defining the key elements in a framework, every school is better able to assess the evidence aligned to required actions. The Strategy influenced this through the naming of preventative, universal actions linked to Being Well.

Mental Health Collaborative Initiatives

Lead: Alberta Health Services

Alberta Health Services Mental Health Collaborative Initiatives provides evidence-based mental health information for educators, primary care providers, mental health professionals and the public. Services include Community Education Services, Community Health Promotion Services, Mental Health Literacy, Continued Professional Development, and CANREACH. These programs link to the Strategy in that they provide education, consultation, community connection, development and resources to communities, children, youth and their families, and professionals dealing with child and adolescent mental health. They contribute to a shared understanding of mental health and mental illness, support common language, increase knowledge, and reduce stigma. In the 2022-2023 fiscal year, Mental Health Collaborative Initiatives delivered 232 unique educational opportunities attended by 22,634 participants. The number of participants indicates a desire for education surrounding mental health in the community and can quantify opportunities of increased knowledge on the topics.

Mental Health Literacy for Youth

Lead: The City of Calgary

The Mental Health Literacy for Youth initiative developed a funding process to support a co-ordinated approach to mental health literacy programming for Indigenous, Black, and diverse Racialized youth through a Mental Health Literacy Advisory Group. As a targeted investment that informs 2B of the Strategy (Expand the reach of mental health literacy training and education programming to wider audiences targeting service providers and community groups who work with youth), Action Dignity Society was selected in May 2023 to develop Youth Weaving World Views to increase the knowledge of mental health, mental illness, and when to seek help within their network of racialized community groups. Results of the initiative will be available in 2025.

Getting Help initiatives

Calgary has a wide range of programs and services to address people's social and health needs. The following section describes how Getting Help initiatives contribute to the strategic long-term outcomes of improving service access and navigation, and increasing knowledge.

Community Collaboration Initiative

Lead: Alberta Health Services

Prior to the Strategy, Alberta Health Services was already exploring the issue of co-ordinated access both internally and externally with community partners. Led by Alberta Health Services, the Community Collaboration Initiative gathered Alberta Health Services Addiction and Mental Health teams, Primary Care Networks, and 42 community organizations to discuss, plan and problem-solve across sectors to make sure the needs of mental health and addiction clients are met through collaborative care. A knowledge gap regarding the services exists for both individuals and service providers. Sharing information about the existing landscape (what does and does not exist) can help to identify real gaps in service for client populations to further explore.

Two symposia were held to date (one in-person on November 29, 2019, and one virtual on November 3rd, 2020) that included discussions, planning and problem-solving between Alberta Health Services and community partners across the Calgary Zone. This initiative is named under 4B of the Strategy (Community Collaboration Initiative). The focus of these symposia was around how service providers can best work together across sectors to improve co-ordination and build on existing partnerships for the benefit of all clients/patients.

System Mapping

Lead: The City of Calgary

In March 2021, the Community Investment Table selected RA2 to develop a system map and interactive dashboard to better understand how available mental health and addiction supports and services are used and experienced by Calgarians. The project conducted surveys with individuals and organizations in 2021 and 2022.

The survey results provided a journey map of how individuals and families with mental health and addictions issues move through programs and systems, what systems they use, and in what sequence they contact them. The results also identified systems barriers and challenges in the sector and offered learnings for where and how to support Calgarians in accessing services.

Closed Loop Referral

Lead: Primary Care Network and Distress Centre Calgary

The Closed Loop Referral pilot was funded through a targeted investment to advance Action 4C of the Strategy (Integrating Health and Social Services). Launched in December 2022 by Distress Centre Calgary, Calgary Foothills Primary Care Network, and Alberta Health Services, the pilot aims to increase service co-ordination and integration between health and social services to offer individual and families a continuum of care that is holistic, human-centered, and appropriate for their needs in a timely manner. This pilot is significant in having family physicians play that important role in identifying patients who would benefit from social determinant of health interventions and connect them to supports that will help patients navigate a complex web of social and community services.

The mid-term report shows that as of May 2023, the pilot was able to successfully connect ten of the 43 referred patients to social determinants of health interventions. The pilot experienced some challenges at the beginning including the privacy review process taking longer than expected and a lower-than-expected referral rate. The pilot team adjusted to address some of the challenges and a detailed report will be available in 2024.

Optimizing School-Based Mental Health Interventions for Calgary Students

Lead: University of Calgary, Mathison Centre for Mental Health

The project's overarching purpose is to improve school-based mental health services for adolescent students in Calgary Board of Education schools. School-based mental health interventions commonly follow a multi-tiered system of support: tier 1 (universal), tier 2 (targeted), and tier 3 (intensive). This research project focuses on tier 2 interventions for students demonstrating mental, emotional, and behavioural problems who are at risk of developing a mental illness. As a targeted investment that informs 5A of the Strategy (Develop, from the ground up, a way to identify and access mental health and addiction services for children and adolescents in schools as early as possible), University of Calgary's Mathison Centre for Mental Health Research and Evaluation will conduct the study.

Two scoping reviews have been completed on tier 2 interventions and tier 2 assessments. The research team is currently in the process of conducting individual interviews and focus groups with staff members and students of the

Calgary Board of Education so they can identify a set of tier 2 interventions and assessments beneficial to adolescent students and feasibly implemented in Calgary Board of Education schools in the future. Preliminary results indicated that students and teachers emphasized the need for more peer-led services, while administrators advocated for supports adapted to the needs of each school. Detailed research findings will be available in 2024.

Community Information Exchange

Lead: Distress Centre Calgary

The Community Information Exchange initiative is a community-based collaboration that facilitates client movement toward mental health and addiction recovery through shared data and client information. Listed under 4A of the Strategy (Community Information Exchange), the Strategy brought together agencies willing to invest time and resources in enhancing collaborations. These early adopters formed the steering committee of the Community Information Exchange, with Distress Centre Calgary as the lead agency.

In June 2023, the Community Information Exchange steering committee agreed to a terms of reference and brought in multidisciplinary network partners to deliver enhanced community care planning through the use of shared language, resource databases, and integrated technology platforms. In its early phase, key successes of the Community Information Exchange include a draft information sharing framework completed to address how information might be shared and governed within the appropriate privacy legislations. An initiative evaluator was contracted. Task forces with subject matter expertise from multiple community agencies and systems are supporting the build of the Community Information Exchange components, including technology, evaluation, common language and information sharing.

Staying Safe initiatives

Staying Safe aims to expand existing community crisis response programs, transform how to respond to people and families in crisis, and prevent future crises. Much of this work is implemented through the Community Safety Investment Framework approved by Council in November 2020.The following section describes how Staying Safe initiatives contribute to the strategic long-term outcome of increased safety.

Sheldon M. Chumir Safety
Lead: The City of Calgary
In 2019, there were growing concerns of public safety around Calgary's SafeWorks Supervised Consumption Services site located at the Sheldon M. Chumir Health Centre. In response, Calgary City Council allocated up to $1 million in one-time funding from the $10-million Prevention Investment Framework with Mental Health and Addictions Lens.

Multiple City of Calgary business units provided services to address public safety issues, often in collaboration with other orders or government and community partners. These activities include but are not limited to co-ordinated response to illegal encampments, increased uniformed presence in the downtown core to monitor potential criminal activity, increased security surveillance, targeted approach to combat drug trafficking in Central Memorial Park, and improved needle response to pick up needles on public and private property.[13] While these measures were put in place to address immediate safety issues, Alberta Health Services continues to explore and develop longer-term solutions.

Research on Transforming Calgary's Crisis Response System
Lead: Centre for Suicide Prevention and PolicyWise for Children and Families
One of the first funded projects under the Community Safety Investment Framework was a research project looking to understand the current landscape of crisis response in Calgary and to identify opportunities that could strengthen the current system, address gaps, and improve quality of care for Calgarians. After conducting evidence-based research and community engagement, Centre for Suicide Prevention and PolicyWise for Children and Families published their research on *Transforming Calgary's Crisis Response System* in December 2021.

The research report provided a blueprint for building a comprehensive crisis response system in Calgary, focusing on successful crisis response initiatives and processes currently operating in the city. Many systems change initiatives and Community Safety Investment Framework funding processes adopted the specific recommendations provided in the report.

911/211 Co-location Project
Lead: Calgary 911 and Distress Centre Calgary 211
Informed by the research report mentioned above, Calgary Police Service, the Calgary's Distress Centre's 211 service line, and Calgary 911 launched the 911/211 co-location project to divert non-life threatening and non-criminal calls from 911 to 211 in February 2021. Beginning August 2022, the program further expanded to include a pilot project enabling 211 to dispatch Calgary Alpha House Society's Human-centered Engagement and Liaison Partnership teams instead of Calgary Police Service to calls reporting non-threatening individuals in District 1.

A total of 1,662 total calls were diverted in 2022 (average of 300+/month) from a Calgary Police Service response to a more appropriate response by the Human-centered Engagement and Liaison Partnership team in District 1. Anecdotal evidence also suggests wait times for Calgarians in crisis has been reduced from two hours for Calgary Police Service to 20 minutes with the Human-centered Engagement and Liaison Partnership teams.

Co-ordinated Community Extreme Weather Response
Lead: Calgary Homeless Foundation
Led by the Calgary Homeless Foundation, the Co-ordinated Community Extreme Weather Response provided access to basic winter weather essentials, created more warm spaces through existing infrastructure and programs, and supported community efforts to reduce barriers to access shelters. The Strategy directly contributed to this initiative through the Community Safety Investment Framework.

This initiative showed the power of working together for a common goal among funders, community service providers and peer outreach groups. Between December 2021 and March 2022, the level of collaboration and co-operation through the initiative resulted in 11,585 interactions provided by outreach teams; 7,087 warming centres visits; 15 outreach teams accessed the Basic Needs Distribution Centre; and 85,695 basic needs items distributed.

Crisis Triage and Mobile Response

Lead: Alberta Health Services, Calgary Alpha House Society, Calgary Police Service, The City of Calgary

Alberta Health Services, Calgary Alpha House Society, Calgary Police Service, The City of Calgary Bylaw and Transit, and Distress Centre Calgary partnered up in various teams to better triage and respond to mental health and crisis situations in Calgary. These partnerships include the Mobile Response Team, Police and Crisis Team, and Human-centered Engagement and Liaison Partnership Team. Even though these teams are programs and services funded through the Community Safety Investment Framework, they are highlighted in the systems change section due to their collaborative nature among different systems. Due to the strong collaborations among the different systems, Calgarians in crisis receive appropriate support in the community rather than by police apprehension or in hospital emergency departments.

Mobile Response Team

In 2021 and 2022, Community Safety Investment Framework funding helped expand the Mobile Response Team with crisis mental health clinical support availability 24 hours per day, seven days per week for Calgarians of all ages, with specific focus to supporting police. Calgary Police Service officers can now speak with mental health professionals while responding to mental health calls for service in the community, no matter what time of day. This also allows Distress Centre volunteers, staff, clients and their families' access to the same support previously had only during daytime hours. As a result of the expansion, Mobile Response Team supported 45 per cent more Calgarians in 2022 (2,402 unique individuals) compared to 2021 (1,659 unique individuals).

Police and Crisis Team

The Police and Crisis Team offers mental health assessment, support, and/or consultation in crisis situations from Alberta Health Services and Calgary Police Service. The Police and Crisis Team has been able to provide direct client and family support based on referrals received from Calgary Police Service, community agencies, Alberta Health Services mental health programs, and calls triaged by the Mobile Response Team. In 2021 and 2022, Community Safety Investment Framework funding helped expand both the Crisis and Police and Crisis Team-Community Treatment Order components of the Police and Crisis Team. The latest results in 2022 showed the Police and Crisis Team successfully supported 464 individuals in crisis so they received the right support at the right time, and away from the justice system and hospital emergency departments.

Human-Centered Engagement and Liaison Partnership Team*

**Formerly known as Downtown Outreach Addiction Partnership Team*

Human-Centered Engagement and Liaison Partnership Team works closely with Calgary Police Service and Emergency Medical Services to reduce unnecessary and inappropriate uses when these services are not needed. As clients experience ongoing traumas and barriers, bringing client choice and collaboration into the mix is important to help clients move towards improved circumstances. The approach has been transformative because it has allowed the Human-Centered Engagement and Liaison Partnership Team to spend more time with individuals on the street and provide additional supports to Alpha House's Emergency Shelter. In the 2022 reporting period, Human-Centered Engagement and Liaison Partnership - Main Team responded to 15,699 socially complex, high-needs interactions to reduce the impacts of public intoxication and increased public safety. Human-Centered Engagement and Liaison Partnership response also reduced the need for law enforcement and health care involvement at the streel level. Community Safety Investment Framework funds from 2021 and 2022 helped to contribute to these outcomes.

Community Mobile Crisis Response

Lead: Alex Community Health Centre

In March 2023, Alex Community Health Centre launched the Community Mobile Crisis Response pilot to support Calgarians in need of urgent support due to non-emergency behavioural or mental health crisis and substance use disorders where there is no threat to safety. The pilot started in two police districts (Districts 4 and 5) to reduce and eventually eliminate the need for a police response in circumstances where civilian teams can provide the first point of contact for individuals in crisis. Community Mobile Crisis Response is a direct response to the Community Safety Investment Framework research on *Transforming Calgary's Crisis Response System* as mentioned above.

Pilot mid-term results showed successful diversion of 75 mental health and substance use distress calls away from police as a primary response. As the pilot is being more recognized by community organizations, Community Mobile Crisis Response has been approved to expand city-wide and extend until April of 2024. Detailed pilot results will be available in Q2/3 2024.

ENDNOTES

[1] Mental Health Commission of Canada. (2012). Changing Directions, Changing Lives: The Mental Health Strategy for Canada - Mental Health Commission of Canada
[2] City of Calgary Council Meeting. (July 30, 2018). Combined Council of Meeting. Notice of Motion 12.1.1 Community Action on Mental Health and Addiction. https://pub-calgary.escribemeetings.com/Meeting.aspx?Id=6be379e5-ad0b-46e0-9954-9e2e05c8a28e&Agenda=Merged&lang=English
[3] The World Bank. (June 2014). Cases in Outcome Harvesting. Ten pilots experiences identify new learning from multi-stakeholder projects to improve results. Accessed from: Cases in Outcome Harvesting: Ten Pilot Experiences Identify New Learning from Multi-Stakeholder Projects to Improve Results (worldbank.org)
[4] Gold, J., Roberts D., Hill, D., & Fisher, S. (June 2014). Outcome-based learning field guide: tools to harvest and monitor outcomes and systematically learn from complex projects. The World Bank.
[5] Organizations did not report on the names of the partnerships so number of partnerships may include duplicates. Community Safety Investment Framework-funded programs did not report on the number of partnerships.
[6] Being Well Implementation Team met 11 times, Getting Help Implementation Team met 11 times, Staying Safe Implementation Team met 10 times.
[7] Statistics Canada. Table 13-10-0805-01 Health characteristics, two-year period estimates, census metropolitan areas and population centres.
[8] Calgary Foundation. (2023). 2022 Quality of Life Report. Accessed: Vital Signs Publications - All Years (calgaryfoundation.org)
[9] RA2. (May 2023). Calgary's Mental Health and Addiction Community Strategy and Action Plan –Journey Mapping Survey. Preliminary findings.
[10] Calgary Foundation. (2022). A Year Without Touch. Calgary Foundation 2021 Vital Signs. Accessed: Vital Signs Publications - All Years (calgaryfoundation.org)
[11] RA2. (May 2023). Calgary's Mental Health and Addiction Community Strategy and Action Plan –Journey Mapping Survey. Preliminary findings.
[12] Government of Alberta. 2023. Substance use surveillance data. Accessed from: https://www.alberta.ca/substance-use-surveillance-data.aspx
[13] City of Calgary Council Meeting. (February 13). SPC on Community and Protective Services. 7.1 Public Safety Near Supervised Consumption Services. SPC on Community and Protective Services - February 13, 2019 (escribemeetings.com)