The Missing Link:
Belonging and Programs

RESOURCES

With Support From:

Association of Ontario Health Centres
Community-governed primary health care
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Key Program Design Considerations of Belonging

1. **Range of Supports**

   The key consideration here is on the issues that are directly addressed by the program. To make substantial progress, especially for people with complex issues, the program has to address the most important stressors.

2. **Level of Support**

   The level of support focuses on how many hours of support are available to the participants. Depending on what clients are contending with, especially during times of crisis, high levels of contact are required to counteract the levels of stress they are facing.

3. **Length of Involvement**

   The length of involvement measures how long people will have access to the program. Generally speaking, for people to attain a higher level of belonging and sense of “mattering” there needs to be a certain duration to the program intervention.

4. **Reciprocity**

   Informal supports that provide opportunities for being valued, doing for oneself, and helping others cannot be overemphasized. From the perspective of increasing levels of belonging and social integration, this is often the missing ingredient.
Typology of the Functional Components of Social Support

Concrete Support:
Provides some form of material aid such as money, clothing, accommodation, or transportation that addresses people’s **basic needs** i.e. poverty mitigation, food security.

Educational Support:
Provides the information, **knowledge** or **develops the skills** required so that the person can effectively cope with their specific problem(s), e.g. Chronic Disease Management Programs.

Emotional Support:
Provides access to informal and formal supports which help clients cope with particular stressful events and the problems of everyday living i.e. **crises intervention**, **counselling**, **support groups**.

Social Integration
Provides access to intimate relationships and enduring social networks and/or provides access to valued and stable social roles that foster the person’s sense of affiliation and personal validation i.e. sense of **belonging and identity**.

Work Sheet #1

1. Select one program that you are involved with at your community health centre.

2. What are the primary issues your clients are dealing with?

3. What range of supports do you offer:
   a) Concrete
   b) Educational
   c) Emotional
   d) Social Integration

4. If any are missing, is there a reason why?

5. Have you developed any complementary programs and strategies outside of your program?

6. How frequently do your program participants meet?

7. Is your program ongoing, or does it have a specific duration and if so, how long?

8. Does your program offer opportunities for reciprocal, informal relationships? If so, how? If not, why not?

Consulting the above, what outcomes can you reasonably expect from the program with the target population?
Helpful Tips: 7 Lessons Learned

1. Have a realistic understanding of what a program can and cannot deliver.

2. Consider holistic intake and assessment. If you don’t start in an integrated way, you will never end up with anything but a fragmented approach.

3. Augment programs with other complimentary groups and community services.

4. Recognize some of the programs/community development projects you have on the go that are building belonging, i.e. community gardens, kitchens, exercise classes, etc.

5. Work with community partners. Make external referrals or co-develop new programs.

6. Create spin-off groups for services such as Chronic Disease Prevention and Management, i.e. venues for people to continue to meet (doesn’t need to be structured).

7. Be mindful of program design considerations for new initiatives your centre might take on.