

Articles

Clinical Sociology and Community Interventions

The Community Ideas Factory Life Skills Project

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Abstract

The Community-Ideas Factory: The Life Skills Project (CIF-LSP) creatively tackles shortcomings in life skills programs offered by our nonprofit (NFP) partners assisting homeless and precariously housed individuals. Through sociological and community-engaged methodologies, our interdisciplinary team collaborated with 16 NFP organizations to develop a responsive, inclusive, online life skills intervention. Our research, grounded in clinical sociology and informed by equity, diversity, and inclusion principles, highlights the diverse nature of essential life skills, influenced by broader social, political, and economic contexts such as social inequities. Notably, we identify social justice as a critical life skill, emphasizing the intersectionality that shapes individuals' lives and advocating for its integration into life skills programming. Our approach diverges from traditional positivist research methods prevalent in life skills studies, facilitating this significant finding.

Keywords: Clinical sociology, community-engaged research, homelessness, intervention, life skills

1. Introduction

At least 235,000 people experience homelessness in Canada each year, with over 35,000 individuals experiencing homelessness on any given night (Gaetz et al. 2013a). Many of these individuals have access to housing but struggle to maintain their housed status due to a lack of life skills, rather than a lack of income (Canadian Observatory on Homelessness [COH] 2021). The World Health Organization (WHO) defines life skills as the “ability to be adaptive and create positive behavior that enables individuals to be effective with the demands and challenges of everyday life” (Prajapati et al. 2016). In 2014, the Halton Region (located in Ontario, Canada) incorporated a Housing First approach to their homelessness strategy. Housing First is a recovery-oriented approach that centers on rapid responses to homelessness, where people experiencing homelessness are quickly moved into independent and permanent housing and are then provided additional support and services as needed (COH 2021). One of the core principles of Housing First models is that once housing is obtained, supports such as life skills training are necessary to prevent subsequent bouts of homelessness. Teaching life skills has been identified as an effective tool for increasing an individual’s quality of life and as a necessity for creating a positive future for youths and adults alike (Bazrafshan et al. 2020).

Much of the existing scholarly work on life skills programming is rooted in a positivist and psychological paradigm.¹ The academic literature we examined for this project is broadly characterized by Emily Murphy-Graham and Alison Cohen (2022) as “life skills for prevention”. This “discourse community” is shaped by public health, psychology, and social work, and life skills programs are viewed as a means of preventing participation in risky behavior

1 For an overview of the various “discursive communities” in the life skills literature see Murphy-Graham and Cohen (2022). For a critique of the psychological and/or individual-based approach to life skills programming see, for example, Maithreyi (2019), Kwauk (2022), and DeJaeghere (2022). See DiSanto & Cumming (2024, under review) for a summary of the critiques of traditional life skills research and approaches, an overview of the critical perspectives in the field, and an application of a critical lens to Canadian life skills programming.

(Murphy–Graham & Cohen 2022). In these studies, scholars typically apply quantitatively–based assessment tools and/or evaluate the effectiveness of already–designed life skills training on individuals (e.g., Helfrich et al. 2006; Helfrich et al. 2011;² Helfrich & Fogg 2007; Moulrier et al. 2019; Sharma et al. 2008). Despite the general methodological similarities among studies, there is a small number that use qualitative methods, where community members are invited to share their experiences and perspectives on life skills learning (e.g., Aviles & Helfrich 2004; Sisselman–Borgia 2021). In recent years, these types of studies have become more prominent, especially in research on life skills programs in developing countries.³ However, there remains a dearth of research that uses community–engaged research approaches in the context of life skills program development, though the studies that do exist are instructive (e.g., Baydala et al. 2009; Cumming et al. 2022). For example, Baydala and colleagues’ (2009) project illustrated that community inclusion is essential for creating effective, culturally resonant programming. They also demonstrate that meaningful inclusion also boasts several other potential benefits, such as increased engagement, a strong sense of identity, cultural pride, and ownership over the program (p. 42). The work of Cumming et al. (2022) highlights the significance of using community–based methodologies to create and evaluate programming that integrates the challenges, needs, and other practical insights articulated by the community.

The purpose of our project was to apply a community–engaged approach to the creation of a life skills curriculum to prevent housing precarity. Thus, a clinical sociological approach was adopted for this project. Clinical sociology is a specialized, multidisciplinary branch of sociology that seeks to address social problems and improve the circumstances of individuals and groups through research

2 Upon further investigation, Helfrich’s (2009–2011) life skills curriculum was informed by various members of the community, including individuals experiencing homelessness and service providers. This is not mentioned in the articles consulted.

3 See, for example, the relatively recent publication of “Life skills education for youth: Critical perspectives” edited by DeJaeghere & Murphy–Graham (2022a). In this collection, authors adopt qualitative and participatory approaches in their research on life skills programs (2022b, p.5).

and interventions that champion the needs of those who are most vulnerable (Fritz 2008a, p. 1; Fritz 2008b, p. 8). Participatory or community-engaged research approaches are commonly used by clinical sociologists (Fritz 2013, p. 397), and the overlap between them—in both principle and process—is notable (Rhéaume 2014, p. 36). For this reason, a community-engaged research approach provided important methodological infrastructure to the project. Community-engaged research is defined as an orientation to research that is grounded in collaborative partnerships between community and academic researchers that are intended “to solve community-identified and community-defined problems” (Boyd 2014, p. 501). The project objectives, planning, and research methodology were informed by the seven principles of community-engaged research: collaboration, community-driven, power sharing, capacity building, social action and social justice orientation, transformative, and innovative (Boyd 2014). McNamara et al. (2019), in the first and founding *Community Ideas Factory* project, illuminated the value of participatory approaches for creating inclusive social innovations and academic-community partnerships for addressing social issues.

Implied in qualitative and community-engaged approaches to life skills development is the notion that those with lived experience—not only academics—offer a crucial and unique lens for creating, evaluating, and improving life skills programs. There is enormous mutual benefit in nurturing community-academic partnerships to co-develop programming that directly corresponds to clients’ lived realities. The Community Ideas Factory: The Life Skills Project (CIF-LSP) was designed to collaboratively address a community-identified problem by leveraging the academic and experiential knowledge of our partners and their clients. In doing so, we seek to make a methodological and empirical contribution to the literature and increase our partners’ capacity to deliver online, evidence-based programming that will, most importantly, lead to positive outcomes for clients.

In this paper, we share the first phase of the CIF-LSP, and we demonstrate how clinical sociology and community-engaged research can address community-identified problems, lead to

novel research findings, and support academics and community practitioners in creating innovative community interventions. We will discuss the significance of life skills, articulate our approach and research methods, and explain how community-engaged research and collaborative and creative problem-solving tools can be used to address community-identified issues and needs. We share our research findings, including the 10 essential life skills the community highlighted, and discuss an important empirical finding that aligns with an emergent conceptual shift in the life skills literature: social justice skills are *crucial* life skills. We conclude by explaining how our research findings were used to build a life skills intervention program which was subsequently shared with our partners across the Region. We also consider future uses of the program as not only an intervention tool but a preventative one as well.

2. Background

The principal investigator (PI) of this research holds dual roles as a professor of sociology and as the executive director of an NFP in the Halton Region of Ontario, Canada. The NFP she leads provides services to homeless and/or precariously housed families, including access to a life skills curriculum. The Region partners with community organizations that provide housing and support with the intended outcome of reducing homelessness. Historically, each of these organizations provided their clients with ad hoc life skills group workshops, including topics such as budgeting, communication, and maintaining healthy relationships. However, in her role as executive director, the PI discovered that most local NFPs had experienced concurrent difficulties incorporating effective life skills into programming, such as: 1) the life skills categories taught are not informed by an equity, diversity, and inclusion (EDI) lens, 2) life skills had historically been taught in-person and in group settings, which were halted during the pandemic, 3) life skills were expensive to run, and all local NFPs compete within the same philanthropic foundations and service clubs for funding which had been severely restricted due to the effects of the pandemic and inflation, and 4) while NFPs understand the importance of running evidence-

based programming, they rarely have the capacity or resources to carry out research or development, implementation, and evaluation. The partner organizations identified a need for an innovative approach to servicing large numbers of marginalized individuals while simultaneously reducing organizational costs, strengthening collaborations, and increasing core competencies so individuals can maintain long-term housing stability.

Using a clinical sociological approach and a community-engaged research design, the CIF-LSP researched (phase 1), designed/developed (phase 2; see DiSanto & Cumming 2024, under review), implemented, and tested (phase 3) a participatory and EDI-informed virtual life skills intervention aligned with the needs of our community partners and their clientele. The program will be shared with our partners, and it will have the potential to reach thousands of individuals annually, reduce costs and strain across organizations, ultimately increase housing security among participants by providing necessary life skills training (COH 2021), and showcase clinical sociological research and design capacity.

The first phase of the project is the research phase and it is guided by two research questions:

1. What are the necessary life skills that individuals require to maintain housing while building competencies post-2020?
2. How can we teach these life skills virtually while ensuring applied learning and a reduction in overall costs for NFPS?

The research findings will form a map of the sociological life skills intervention that will be piloted and evaluated with our partner organizations.

3. Literature Review – What does research suggest are the necessary life skills?

The WHO broadly defines life skills as enabling individuals to adapt, engage in positive behavior, and effectively navigate “the demands and challenges of everyday life” (WHO 2003, p. 3). The WHO identified 10 core skills, including self-awareness, critical thinking, creative thinking, decision-making, problem-solving,

effective communication, interpersonal relationships, empathy, coping with stress, and coping with emotions (WHO 1997, p. 1). The United Nations International Children's Emergency Fund (UNICEF) organizes abilities into four categories: foundational (e.g., literacy and numeracy), socio-emotional, digital (to use and understand technology), and employment-related skills (UNICEF n.d., para. 6). Similarly, the Homeless Hub, the largest Canadian research institute focused on homelessness, delineates three skills categories: core (e.g., literacy, numeracy, and computer usage), independent living (e.g., household management and budgeting), and social (e.g., interpersonal relationships and conflict resolution) (COH 2021, para. 2).

Both academic scholars and service providers agree that the following are skills individuals require for success across a variety of life domains: *the ability to navigate interpersonal relationships* (see Cameron et al. 2018, Kamloops Homelessness Action Plan [KHAP] 2013; Moulrier et al. 2019; Prajapati et al. 2016; Savoji & Ganji 2013; Tiwari et al. 2020; WHO 1997); *the need for self-awareness* (see Cameron et al. 2018; Moulrier et al. 2019; Prajapati et al. 2017; Savoji & Ganji 2013, p. 1257; Tiwari et al. 2020); *having a capacity for skillful decision-making* (see Moulrier et al. 2019; Prajapati et al. 2017; Savoji & Ganji 2013; Tiwari et al. 2020); and *the ability to communicate effectively* (see Government of Canada 2021; Moulrier et al. 2019; Prajapati et al. 2017; UNICEF n.d.; WHO 1997).

For individuals who experience housing precarity, life skills are an essential tool needed to achieve long-term housing stability and facilitate meaningful community connections. The significance of this programming is reflected in the fact that life skills workshops are a typical feature of NFP programming (Gaetz et al. 2013b). Furthermore, the Kamloops Homelessness Action Plan (2013) emphasizes the need for NFPs to offer client interventions in areas like financial literacy, home and family management, employability skills, health and wellness, and conflict resolution (p. 6–7). Everyday skills such as household management and maintenance (see Community Youth Services 2017; Helfrich & Fogg 2007), financial literacy and budgeting (see Helfrich & Fogg 2007),

and career planning and employment-related skills (see KHAP 2013; UNICEF n.d.) are identified as imperative to maintaining housing. Competency in parenting skills and food literacy were emphasized among those who are recovering from addiction, single parents, and fostered youth aging out of care (see Green Hill Recovery n.d.; The Family Initiative 2019). Technological literacy was not frequently mentioned in the literature. However, one explanation for this may be that service organizations classify this skill set as employment-related rather than a distinct skill set. Nevertheless, the COVID-19 pandemic has revealed a need for technological knowledge, skills, and access. As Beaunoyer et al. (2020) note, the pandemic has accentuated “the importance of a hidden form of social inequality, digital inequalities” (p. 2).

Gaetz et al. (2016) identify three broad factors that cause homelessness: structural factors, system failures, and individual factors. As an intervention, life skills programming attends to the level of the individual, providing opportunities to develop practical skills and knowledge relevant to circumstances linked to homelessness, such as mental health, addiction, loss of employment, personal crisis, and relational issues (Gaetz et al. 2016). For instance, acquiring life skills and understanding the complexity of emotions can have positive impacts on mental health and well-being (Cameron et al. 2018, p. 431; Moulier et al. 2019, p. 9; Prajapati et al. 2017, p. 4; Savoji & Ganji 2013, p. 1257). Skills interventions can improve emotional regulation and resilience (Cameron et al. 2018, p. 431) and can reduce participation in risk behaviors (see Moulier et al. 2019, p. 9; Savoji & Ganji 2013, p. 1256; WHO 1997, p. 4). Well-developed life skills can reduce alcohol use disorder and suicidal ideation (Obeid et al. 2021, p.1) and are associated with a reduction in smoking and bullying (Moulier et al. 2019, p. 6). Gaining these competencies can promote social interaction and strengthen self-confidence, critical thinking skills, problem-solving, and decision-making while developing coping mechanisms and emotional intelligence (Moulier et al. 2019, p. 2; Prajapati et al. 2017, p. 4; Savoji & Ganji 2013, p. 1257). These can improve quality of life and reduce short- and long-term health impacts and the prevalence of chronic diseases (Cameron et al. 2018, p. 431). It also contributes to self-confidence, self-esteem,

and efficacy and helps translate knowledge and values into healthy decision-making and behavior (WHO 2012, p. 4).

Individuals with developed foundational competencies are thus better able to skillfully navigate obstacles as they arise. Having life skills provides one set of foundational tools to empower individuals to potentially improve their entire life. Thus, this project endeavors to understand the skills that those facing housing precarity are missing, from their perspective, and to design and implement a shared client-centric, EDI-informed curriculum.

4. Methodology: Community-Engaged Research

Community-engaged research, like clinical sociology, redefines the traditional researcher-subject relationship by creating “participative communities of inquiry” through the engagement of multiple community stakeholders (Boyd 2014, p. 503). Operating from the core belief that those who are affected by research ought to be meaningfully included in the research itself, we collaborated with 16 NFP organizations in the Halton Region: Big Brothers Big Sisters Halton Hamilton, Bridging the Gap, Children’s Aid Society, Food For Life, Halton Multicultural Council, HMC Connections, Halton Women’s Place, Kerr Street Mission, Oakville Community Foundation, Oak Park Neighbourhood Center, Peterborough Housing Corporation, Sexual Assault and Violence Intervention Services, Shifra Homes, United Way Halton Hamilton, Woodgreen, YMCA of Oakville, and the Region. The NFPs service diverse populations, but all share the goal to build more collaborative and inclusive communities that better serve marginalized populations using evidence-based, EDI-informed life skills programming that is accessible across organizations.

Given that EDI are driving principles of this project, it was essential to have a large team that represents the diversity of the community and the clients/populations NFPs serve. We established a Program Advisory Committee, representing staff from each of the partner organizations that were engaged at key decision-making points in the project to ensure the project was moving in a direction that reflected the needs of their clients and their organization. Our partnerships were instrumental in providing meaningful feedback

at key stages of the research, including assistance in survey design and participation in the research itself. A second Program Advisory Committee was developed that was specifically focused on equity, diversity, and inclusivity (EDI-PAC). The EDI-PAC was made up of equity-deserving individuals who graduated from programming at 10 of the NFP. These individuals represented differences in race, ethnicity, gender identity, sexuality, and ability. In total, 10 individuals with lived experience met bi-annually to review the life skills development and to offer insights and suggestions to make the outcomes as inclusive as possible.

Supplementing our community-engaged research, an applied creative problem-solving approach was used to engage our community partners to address issues with existing life skills programs across organizations. While there are different iterations of creative problem-solving, our team used the Osborn-Parnes Creative Problem-Solving program because of the effective outcomes it produces (see Rose & Lin 1984; Scott et al. 2004; Torrance 1972). The hallmark of the dynamic balance of divergent thinking (a broad search for many diverse and novel alternatives) and convergent thinking (a focused and affirmative evaluation of novel alternatives) is applied across the phases of the problem-solving process. The objective of this methodological design is to ensure that the outputs of the project are grounded in the specific needs of the community—both in terms of what clients need and supporting how organizations provide their programming. We reasoned that since this was the central goal, representatives from the organizations, as well as clients and frontline workers, needed to be engaged in the project from the very beginning. Using this methodology ensures that everyone's needs, perspectives, and experiences are reflected in the program and is, therefore, valuable for all stakeholders.

5. Data Collection

We used two research methods to collect data: creative problem-solving sessions and surveys. A purposive sampling method was used. Two creative problem-solving sessions were held at different stages of the research and participants represented various roles within our

partner organizations, including frontline workers, managers, and executive directors. During the session, partners expressed what they believed the most important life skills were for their clients. These sessions formed our life skills template. The subsequent data was mapped onto this template and was amended as needed, ensuring that the voices of partners shaped how we conceptualized life skills programming. A final creative problem-solving session was held to further refine and triangulate our findings.

In addition to the two creative problem-solving sessions, two surveys were created. Data was collected from February 16th to March 4th, 2022. Both surveys were shared with 30 social service organizations in the Region and the surrounding area through the online survey tool, Qualtrics, to be distributed to frontline workers and clients at their organizations. At least 13 of 30 invited NFP organizations participated in the distribution of surveys to workers and client groups. Individuals were invited to participate if they were clients receiving services, or if they worked directly as client-facing frontline workers associated with one of the community partners. The first survey was administered to frontline workers (n= 104) at NFPs who work with marginalized and/or precariously housed individuals, while the other was administered to the clients (n= 97) of these organizations. Participants of both surveys were asked a series of ranking and open- and closed-ended questions. The objective of the surveys was to capture the unique insights from both groups and determine which life skills are most needed, which are most valuable, and what effective learning and accessibility strategies can be built into the online learning modules.

EDI is a foundational principle of community-engaged research (Boyd 2014) and shaped the entire project, including the sampling approach (i.e., which organizations were included in the project) and the types of survey questions we asked (i.e., ensuring a range of experiences were represented such as knowing how to manage menstrual cycle symptoms, accessing culturally relevant mental health services, and cultural fluency). Demographic information was also collected to further ensure diverse representation. By considering intersectionality, like social location and personal experience, a more

comprehensive understanding of the circumstances and needs of clients could be captured in the survey responses.

Client and frontline worker participants represented diverse perspectives and lived experiences across multiple dimensions, such as housing, employment, family status, sexual orientation, race/ethnicity, and religion.

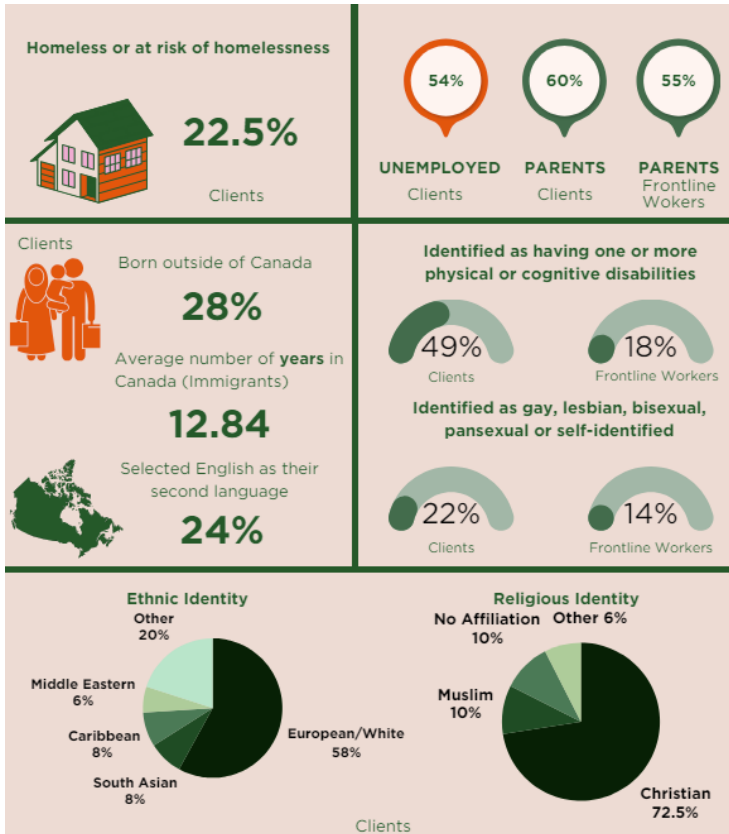


Fig. 1: Participant demographics⁴

4 Demographic disparities were also noted. There was a low representation of men in client and frontline worker surveys. Of the clients, only 24% of respondents were male, whereas 71% were female, and 5% were non-binary or identified as third gender. This disparity can be explained in part because some of the organizations that distributed the survey

6. Data Analysis

Thematic analysis was used to analyze the data from the creative problem-solving sessions and the qualitative survey data. For closed-ended and ranking survey questions, researchers looked strictly at mean responses and mean ranks for both groups of participants. Thematic analysis is a foundational method of analysis in qualitative research that involves identifying and describing patterns in the data and organizing these into themes (Braun & Clarke 2006, p. 79). We took a realist approach to the analysis by approaching the brainstorming data at face value—as representing the “experiences, meanings and reality of participants” (p. 81). Using a bottom-up (inductive) approach, the research team followed what our partners identified as essential life skills for achieving housing security. In other words, the analysis was guided and informed by what our partners gave voice to in the session. Consistent with the realist approach, the data was analyzed at the “semantic or explicit level” (p. 84). At this level of analysis, data is interpreted for its literal meaning—that is, what the participant actually said or wrote—rather than the meanings, assumptions, or ideologies that undergird the utterance (p. 84).

7. Findings: What our Community Defines as a Necessary Life Skill

Ten life skills themes and several subthemes emerged from our data. They include:

1. **Financial Skills and Knowledge:** Partners overwhelmingly discussed the significance of financial skills *and* financial knowledge for housing security, such as financial literacy, budgeting, financial planning, saving, and paying bills.
2. **Interpersonal Skills:** Communication skills, social skills, self-advocacy skills, relationship skills, negotiation skills, presentation

support women specifically. Similarly, of the frontline workers who answered the surveys, 85% were female, 10% male, 3% preferred not to answer, 2% were non-binary, and 1% identified as genderqueer, which is an anticipated outcome given the number of women who enter the social service sector (Statistics Canada 2017).

of self, and conflict resolution skills were discussed extensively by our partners. These skills are foundational to other identified themes, such as employment skills (e.g., interview skills).

3. **Household Management Skills:** While not emphasized to the same extent as the other skills, participants' responses did suggest that having the skills and knowledge essential to maintaining health, safety, and comfort in one's home was a critical life skill. This includes ensuring the space is clean, chores are done regularly, safety devices, like smoke detectors, are in working order, knowing how to cook nutritious meals, and grocery shopping effectively. These were categorized under two subthemes: (1) household maintenance and knowledge and (2) cooking and shopping skills.
4. **Personal Skills:** Caring for one's personal health and wellness was identified as an essential skill. Specifically, crisis management and emotional regulation skills, self-care skills, mindset, hygiene, and family planning were raised.
5. **Skills for Success:** Broad in its scope, 'skills for success' represent several skills that form the bedrock on which success can be built, whether in the context of employment, education, relationships, housing, or everyday life. Skills highlighted by our partners include time management, organization, and goal setting and planning.
6. **Resourcefulness Skills:** The ability to find, access, and utilize relevant community supports and resources to combat housing insecurity was a strong theme in the sessions. Having this skill in one's toolbox empowers individuals to take control over some of the barriers preventing housing security or that exacerbate insecurity, such as accessing food, mental health and addictions support, technology, financial services, employment support, education support, housing and housing support, transportation, legal support, and shelters.
7. **Critical Thinking and Research Skills:** The ability to identify a problem and formulate a realistic solution, make an informed decision, and think critically about information, options, choices, and one's circumstances were all important life skills identified

by partners. These skills intersect with many other themes, including employment skills and finding and accessing support and resources in one's community.

8. **Employment Skills:** Employment-related skills that enable individuals to obtain and maintain employment (e.g., how to find a job, how to sustain employment, how to apply for a job, how to write a resume, how to interview for a job, professional relationship-building, etc.), were recognized as crucial.
9. **Housing Research Skills and Knowledge:** Participants communicated that there are specific skills *and* knowledge needed to make good decisions about one's housing situation (e.g., subsidized housing, rent vs. ownership, location, landlord and tenant rights and responsibilities, etc.).
10. **Social Justice Life Skills:** Refers to the knowledge and skills needed to understand EDI and how to navigate oppressive systems and situations in Canadian society.

The data from our research engagements revealed that there are specific life skills clients and frontline workers perceive and/or experience as more or less valuable. For instance, 79% of clients indicated that they have one or more coping techniques to help regulate emotions and manage stress (e.g., meditation, yoga, and breathing exercises). However, when clients were asked which life skill they struggle with the most, coping with emotions and stress management had the highest mean ranking. Additionally, 42% of survey respondents answered 'no' when asked if they knew how to access culturally relevant mental health services. Nineteen percent of respondents indicated that they do not have the contact information for anyone—including community resources—if they are feeling emotionally overwhelmed or struggling with their mental health.

Frontline workers identified self-advocacy skills as the skill that clients struggle with the most. When clients were asked to assess their level of comfort in standing up for themselves in situations where they feel they are being mistreated, 18% responded that they are extremely uncomfortable and another 21% said they are somewhat uncomfortable, with only 32% responding that they are extremely

comfortable standing up for themselves. It is also important to note that even those who claim they are comfortable standing up for themselves may not have the skills to do so in a healthy manner. The remaining 29% stated that they were unsure. When we inquired about how clients felt about asking questions about matters they are unfamiliar with or for questions they do not know the answer to, 21% of clients indicated some degree of discomfort with the task. In other words, the perceptions of the frontline workers align with the experiences of clients.

In terms of what clients believe they need less assistance with, clients and frontline workers both selected cooking and cleaning skills (Figure 2). Clients indicated a high degree of confidence in their ability to perform cooking and cleaning tasks. Whether it be chopping vegetables, using appliances, or cleaning their food, kitchen, and living space, more than 90% of clients are confident in their ability to perform these tasks.

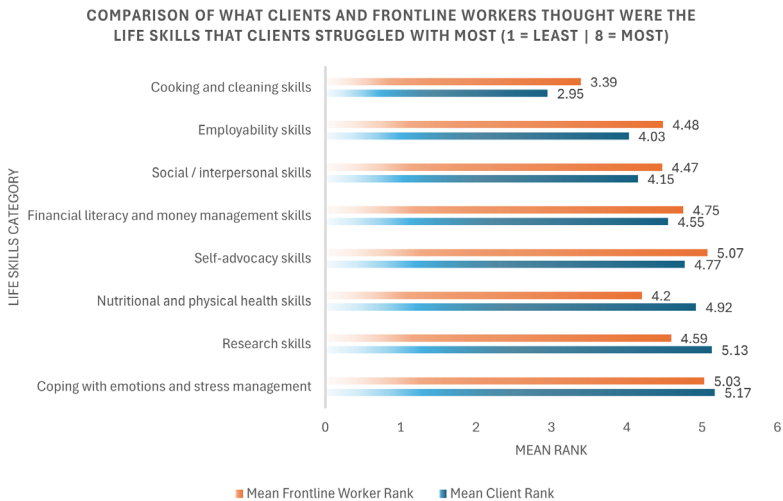


Fig. 2: Comparative survey responses to the question of what life skills clients struggle with most

When asked what life skills would be the most valuable for clients, clients and frontline workers selected financial literacy and money

management. Responses revealed that there are areas where clients lack financial knowledge. Sixty-two percent of respondents stated that they own a credit card, but only 74% of those individuals said they know how interest rates and the borrowing and repayment process worked. Fifty-one percent of credit card owners responded that they ‘always’ pay their minimum balance, and only 55% of survey respondents stated that they confidently understand arrears. Sixty-eight percent of respondents confidently understood how to check their credit score, yet only 42% knew that checking their credit score makes it go down. Regarding budgeting, 71% of respondents said that they knew how to create a budget, but of those respondents, 41% of them said they were unable to consistently follow their budgets.

The least valuable skill, from the perspective of both clients and frontline workers, is research skills (Figure 3). Sixty-nine percent of respondents said they were extremely comfortable with their research skill set, while 7% said that they were extremely uncomfortable using the Internet to find answers to their questions. Regarding navigating through, and assessing the credibility of information sources, only 42% of respondents said they were extremely comfortable differentiating between credible and non-credible information.

In addition to providing extensive information about essential life skills for addressing housing insecurity, our partner engagements revealed that it is not only *skills* that are significant. Contextually relevant *knowledge* is also a critical enabler of successfully navigating relationships, supports, decisions, planning, etc. (knowing how to budget—a skill—is just as crucial to understanding what you can afford and why—knowledge). For example, knowing *how* to find a place to live using apps or websites (i.e., a skill) is just as important as having the *knowledge* to make informed decisions about where to live (e.g., location, transportation logistics, travel to and from school/work, etc.). Indeed, only 49% of clients had stable housing and were in a healthy living environment at the time of the survey, while 22.5% said they were homeless or at risk of homelessness. When it came to housing research skills and knowledge, 58% of respondents said they knew how to complete a housing search, while 34% answered ‘somewhat’, and 6% answered ‘no’. Forty percent

of respondents indicated they did not fully understand how to read a lease agreement/tenant contract. Additionally, 44% said they knew their rights as a tenant, with 40% selecting ‘somewhat’ and 16% selecting ‘no’. These findings align with the literature on life skills and indicate that knowledge (or the ability to access reliable knowledge) is an important complement to life skills programming (e.g., Kwauk & Braga 2017). The themes and subthemes are formulated to represent how knowledge *and* skills are entangled.

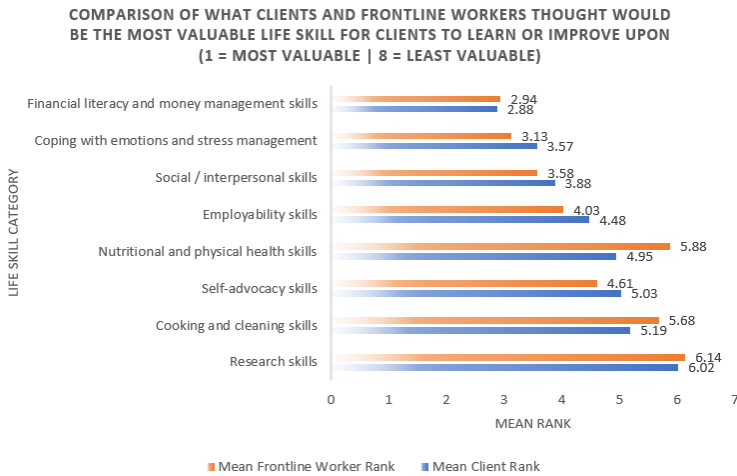


Fig. 3: Comparative survey responses to the question of what life skills would be most valuable for clients.

8. Discussion: A Clinical Sociological and Intersectional Approach to Life Skills

The findings of our research aligned in many ways with other life skills research. Our participants also recognized the importance of skills such as self-awareness, critical thinking, creative thinking, decision-making, problem-solving, effective communication, interpersonal relationships, empathy, coping with stress, and coping with emotions (WHO 1997, p. 1). Also noted were employment-related skills (UNICEF, n.d.) and independent living skills (COH 2021). Our

participants, however, were able to articulate in greater detail the variations of skills they felt they required to be healthier and more resilient. This led us to determine that there were nine life skills that generally aligned with the findings of previous research: financial skills, interpersonal skills, household management skills, personal skills, resourcefulness skills, skills for success, critical thinking and research skills, employment skills, and housing research skills and knowledge.

The tenth and most novel life skill that emerged, which drew our attention to a programming need that was largely absent in the “life skills for prevention” literature we reviewed,⁵ (Murphy–Graham & Cohen 2022) is social justice skills. We define social justice skills to refer to the knowledge and tools needed to understand EDI and how to navigate oppressive systems and situations (e.g., stereotypes, stigmas, and discrimination) in Canadian society. Collins (1990) famously used the “matrix of domination” to describe the interlocking, institutionalized, and unjust relations between social groups. Within the matrix of domination, systems of power, oppression, privilege, and resistance are intertwined (p. 225–227), shaping the lives of individuals and groups in disparate ways. As such, there are some life skills that are arguably universally beneficial to all members of Canadian society (e.g., budgeting, household management, etc.), while others are essential for systematically excluded individuals and groups who must safely navigate the unequal landscape of Canadian society (e.g., navigating sexism and/or racism in the workplace).

This local, empirical finding aligns with a growing body of scholarly literature that champions the adoption of a critical and transformative approach to life skills learning in developing countries (Arur & DeJaeghere 2019; DeJaeghere 2022; Kwauk 2022; Kwauk & Braga 2017; Murphy–Graham & Cohen 2022; Sahni 2022).⁶ Scholars using this approach recognize that the oppressive societal conditions

5 See Sisselman–Borgia (2021) as an exception to this. Social justice awareness is part of the life skills empowerment program designed for homeless youth. Specific details about this element of the programming are not provided in Sisselman–Borgia (2021).

6 See DiSanto & Cumming (2024, under review) for a review of the critical life skills research.

that structure clients' lives must be meaningfully addressed in programming for individuals to experience a genuine change in their circumstances. In other words, these scholars recognize that a social justice approach is imperative to life skills learning. Kwauk and Braga (2017) explain that a gender transformative approach is one that "goes beyond a focus on individual self-improvement toward focusing on the structures and relations of power perpetuating gender inequality" (p. 4). This approach expands the scope of conventional life skills programming. Instead of simply teaching clients traditional life skills, clients are empowered to understand how they are situated within the social order, the systems that affect the experience, internalized values, norms, and beliefs they hold about themselves and others, institutionalized practices and policies, and ultimately how to navigate and exercise agency in everyday situations (p. 7). While much of the critical life skills literature has focused on gender inequality to the exclusion of an approach that understands systems of oppression as interconnected (Arur & DeJaeghere 2022), our findings suggest that an intersectional social justice lens is best suited for unpacking the interlocking webs of oppression that characterize Canadian society and that deeply impact the clients the innovation will serve. The following two quotes from our surveys demonstrate this point:

*Being treated differently due to my financial position by people and organizations
 - Being treated differently because I was and am still a young single mother -
 People treating my children differently - Not having the same access to resources
 - Having to pay higher interest rates for everything - Paying more for everything
 because I can't buy in bulk or shop offseason. - Not being able to travel to
 many stores to shop the sales - Always have to pay more for my bills due to late
 payments - Not being able to resell things for the same price as people judge
 where I live and they believe we have bugs. (Client)*

*The most impactful skills would be ways to take care of their mental health, while
 working towards budgeting their finances, finding work and finding housing
 for their families. I think all of these are so interconnected and their various
 intersectionalities of race, gender, culture, citizenship etc. amplify these potential
 difficulties. (Frontline Worker)*

Similarly, the issue of ‘barriers’ was brought up many times in our data. Barriers are not only a detrimental feature of the broader conditions under which life skills programming is experienced and delivered, but they also shape clients’ lives, opportunities, and outcomes.⁷ Clients voiced the impacts that interlocking systems of power have on their lives when they were asked to discuss the barriers they experience due to their identity (e.g., race, class, gender, sexuality, age, disability, immigration status, etc.) and/or their circumstances, such as physical and mental health challenges, lack of access to resources (e.g., finances, affordable housing, services, etc.), being alone (i.e., no support), being a single parent, English as a second language, lack of employment, trauma, and shame for lack of life skills. Clients also identified barriers related to prejudices/stigma, perceptions, and discrimination based on identity. For example, in the surveys, clients shared the intersecting systemic barriers they have consistently faced and how they affect their quality of life, employment, and housing circumstances.

...My dear international experience is not being recognized. I am doing a survival job at night. When I finish my shift, I go for my Co-op Placement (without pay) during the day. So that I could find a job in the area related to my previous experience of over 15 years. The employer in the morning does not understand the lack [of] limitations of a father who has to attend appointments for his physically disabled child. (Client)

Single parenthood makes it difficult to work and also take care of myself so I haven't been working. Both my kids struggle with mental health and we have experienced homelessness more than once. Significant trauma makes it hard to find people to work with to help with my mental health to get better. (Client)

Not feeling well. Not enough money. I use[d] to be able to care for myself. I had a good job. Now I can barely walk, I am tired all the time and rely on people to get me to appointments and shopping. I feel defeated. All my illnesses have made my body pretty useless. (Client)

7 Joan DeJaeghere (2022) has also noted that a limitation of life skills programming is focusing on the individual’s behaviour (which is presumably easier to change) rather than altering barriers and social structures (p.78). See DeJaeghere’s (2022) chapter for an approach to life skills that couples individual change with transformative social change.

Employment. No one hires seniors. (Client)

As a single parent it's difficult to manage everything and face time management issue[s]. (Client)

The struggles I face surrounds not being able to provide basic needs for my family. The lack of financial independence. I struggle with loneliness and not having close relationships (a village) in Canada. (Client)

While some barriers can be overcome with the acquisition of life skills, offering life skills programming will not fundamentally remedy systemic and exogenous barriers that create conditions of social, employment, financial, and housing insecurity in patterned ways. It is also necessary to note the impact that these barriers have on one's ability to apply life skills in real-life situations. Without a sociological understanding of how individuals are affected by their social environments, life skills programming may appear to be shifting inequality of outcome onto the individual.

The inherent tension of life skills programming as simultaneously valuable for individuals and ineffective for ameliorating conditions of inequality was expressed by participants. The latter demonstrates the need for broader systemic transformation to remove barriers and inequities. These sentiments were conveyed in two distinct responses. A frontline worker notes:

My clients would benefit most from systemic change - for example, budgeting will only help so much when they live in a society where the cost of living is so high, they cannot budget their way out of poverty. (Frontline Worker)

Whereas a client said the following:

This project is awesome especially if it is readily and easily available. It can help a lot [of] individuals to navigate effectively, especially those who are struggling financially, particularly those who have coping issues [such as] how to pay rent. This could lead to mental issues and other problems. Having a solid support system that could help gain needed skills will I think make a great impact to make the living condition better in all aspects. (Client)

In sharing the barriers they are up against, clients affirmed the need for transformative social change. While our life skills program cannot dismantle existing barriers or remedy social injustice, our approach and findings illuminate the importance of developing life skills programming from a sociological lens. Client-centric life skills programming must account for the individual as a social subject—an agent, situated and affected by a complex social structure (Kwauk & Braga 2017). Life skills programming must incorporate a recognition that individuals' social environments are replete with barriers *and* enhance one's means of navigating them whilst recognizing that some barriers are not reasonably surmountable at the individual level.

As such, under the broad thematic umbrella of social justice as a life skill, there are two branches or subthemes that we identified in our data.⁸ The first is premised on the fact that society is diverse and structured by intersecting oppressive social forces (e.g., classism, racism, xenophobia, sexism, homophobia and heteronormativity, transphobia and cisnormativity, ableism, and many others). In a society structured by oppressive attitudes and practices, individuals from systematically excluded groups experience situations and interactions where they must prepare for, navigate, and process the aftermath of hateful or prejudicial attitudes or discrimination against them. For instance, one frontline worker identified the need for individuals to learn how to respond to racism in a healthy and appropriate way. Along similar lines, a client stated the importance of learning how to deal with sexism. Therefore, *responding to prejudice and discrimination* is a crucial skill and constitutes the first subtheme.

Clients clearly articulated that the life skills modules themselves must be created through an EDI lens to ensure the intersectional needs of individuals are met. For example, a client who self-identified as likely being on the autism spectrum noted that they have trouble interacting with people. This highlights that developing

8 These two initial subthemes were revised during our second creative problem-solving sessions. Participants refined these submodules into the following: (1) self-awareness, (2) cultural safety, (3) empowerment and self-advocacy, (4) systemic inequality, and (5) relationship dynamics of the workplace. The social justice learning module includes these five sub-modules.

modules on interpersonal skills requires attentiveness to aspects of social interactions that are taken for granted by someone who is neurotypical. Elaborating on the nuances of social interactions is essential to be relevant to someone on the autism spectrum. Another client shared the importance of inclusive sex education appropriate to the 2SLGBTQ+ community and nonbinary individuals. A client who identified as chronically ill drew our attention to “spoon theory” and the importance of understanding time management from the perspective of someone who lives with chronic illness. Their response indicates that effective time management might look different for an individual who is chronically ill because they have significantly less time and energy to devote to various tasks. A client who lives and cooks in their van shared that programming around food, for example, must consider differential access to appliances and plumbing.

Finally, a frontline worker indicated the need for programming that conveys knowledge about Canadian culture—in general, and in the workplace in particular—to support newcomers in adapting to their new community and equip them with skills and knowledge for success in the workplace. Indeed, when asked about their comfort level in navigating Canadian culture, only 57% of survey respondents stated that they understand and can comfortably navigate local cultural norms, 48% feel they are part of the local culture, but 75% stated that they understand Canadian terminology and systems. Notably, cultural and professional socialization has the potential to benefit all participants, regardless of immigration status. Attentiveness to the general cultural context of life skills programming was also highlighted.

Clients also expressed a desire to learn about EDI practices, such as understanding the context of social justice issues and how to ask for gender pronouns. The second social justice subtheme, then, is *learning about diversity and inclusive practices*. This subtheme creates a learning opportunity where clients can develop an informed understanding of identity and differences in Canadian society (e.g., gender, race, sexuality, disability, class, etc.) and learn related best practices. By incorporating a subtheme that focuses on equipping

participants with the knowledge and skills to better understand themselves and others, clients are provided opportunities to prepare to navigate personal and professional situations respectfully and empathetically. Importantly, this subtheme also expresses (to some extent) that EDI is valuable among community members, and there is a desire to understand the experiences of others as it relates to equity and inclusion. This suggests that social justice life skills can also provide critical learning and unlearning opportunities for individuals who are members of socially privileged groups (e.g., cisgender)—an essential component of transformative social change.

9. Concluding Thoughts

Through a community-engaged approach, an interdisciplinary research team collaborated with 16 NFPs to identify crucial life skills essential for the housing stability of homeless and precariously housed individuals. In so doing, the Project Advisory Committees ensured ongoing community engagement at every stage, including a specific focus on EDI. Life skills identified include financial skills and knowledge, interpersonal skills, household management, personal skills, skills for success, resourcefulness, critical thinking and research, employment, housing and research skills and knowledge, and social justice skills. Having identified these skills, the team created, implemented, and shared a robust online life skills intervention, providing an opportunity to alleviate financial strains faced by partners delivering personalized, client-centric support.

In the “life skills for prevention” literature (Murphy-Graham & Cohen 2022), life skills programming is often discussed in a taken-for-granted fashion. Questions about how the curriculum was designed, the rationale behind the design, who was involved, and to what extent, if any, community members were consulted are frequently left unanswered. The absence of community members, particularly clients, in curriculum design is a curious one since clients are the ones who need and use the programming. Our project challenges this top-down approach using a community-engaged research approach to develop an EDI-informed life skills curriculum

that centers on the needs of clients and addresses community-identified issues using sociological tools.

Furthermore, the life skills curriculum has traditionally been designed and presented without a critical attentiveness to diversity and inclusion. Individuals' everyday lives and the skills they need to live a safe, healthy, and self-determined life are not uniform (WHO 2003), though traditional life skills programming has often implicitly pictured essential life skills as homogenous and generalizable to all. Importantly, however, this is beginning to change. There is a conceptual shift occurring in the literature where critical, social justice-oriented perspectives are being integrated into life skills programming in developing countries (see Arur & DeJaeghere 2019; DeJaeghere 2022; Kwauk 2022; Kwauk & Braga 2017; Sahni 2022). The recognition and elaboration of social justice as a life skill in our local findings provides additional empirical support for an intersectional, community-engaged, EDI, and sociological approach to life skills programming. Our research highlights the nuanced intersectionalities that shape the lives and needs of individuals, the larger sociopolitical and economic contexts that surround life skills programming, the skills needed to navigate inequitable terrain, and the community-based processes that can be used to develop relevant and effective programming. Therefore, social justice as a life skill is a significant finding in our context. While we are confident that NFPs regularly engage in this type of life skills work with their clients, this is not a prominent approach to life skills learning in the North American 'prevention' life skills literature. This finding was made possible by using a clinical sociological and community-engaged approach, which are not commonly used in life skills research (for exceptions, see Baydala et al. 2009 and Cumming et al. 2022).

Our findings exemplify the power of clinical sociology in addressing social issues and enhancing the well-being of vulnerable individuals and groups in a Canadian context (Fritz 2008a, p. 1; Fritz 2008b, p. 8). The clinical sociological framework emerged as a potent strategy, providing nuanced insights into the diverse life skills needs contributing to homelessness, culminating in the successful launch of a comprehensive life skills curriculum across

all partner organizations. This shared online life skills programming has the ability to act not only as a prudent intervention tool for those presently facing homelessness or precarious housing, interrupting cycles of homelessness, but as a prevention tool to stop homelessness before its onset. The outcomes will continue to be monitored to determine the full efficacy of the design over time.

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