



Community Health and Wellness Fort Erie

**Using the Community's Assets
and Research to Build a
Healthier Community**



The Definition of Health

WHO

**Considers the mental, social,
spiritual, environmental,
physical aspects of health**



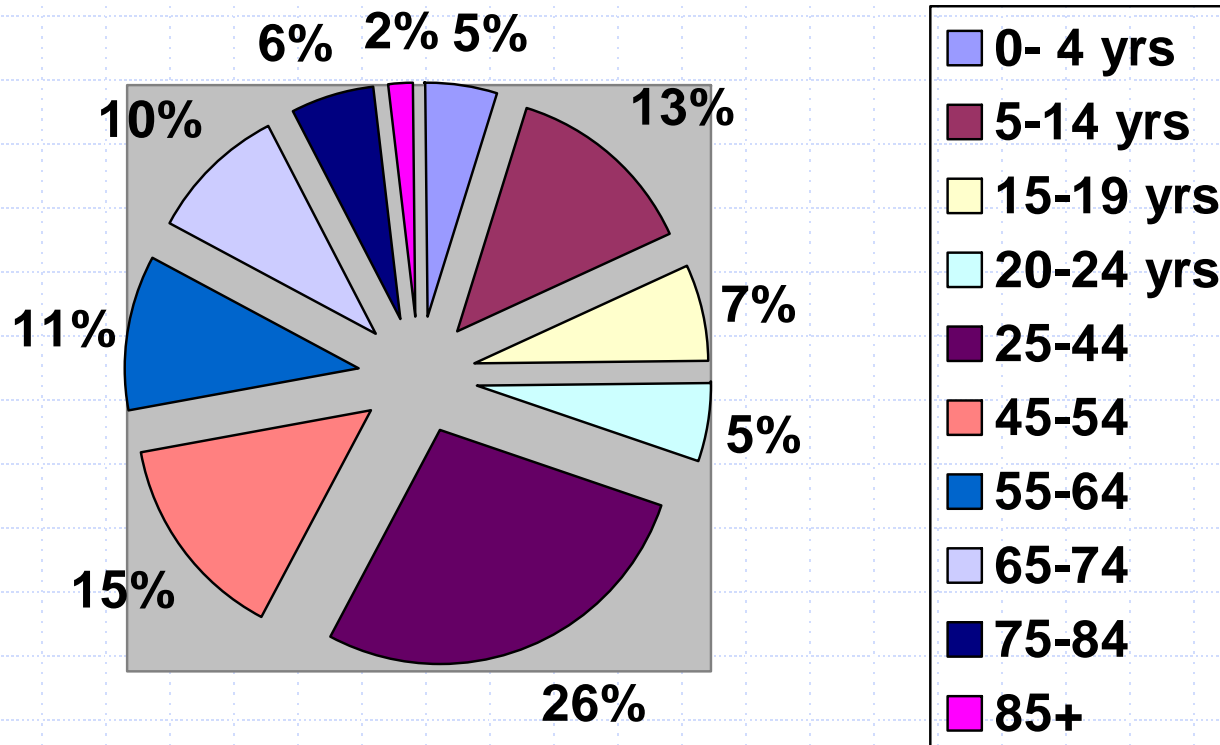
Fort Erie

- ◆ Rural Community – historic neighbourhood communities)
- ◆ 167 sq Km
- ◆ 28,143 plus population (Increases in summer)
- ◆ Gaming Community
- ◆ 16% Newcomers to Canada
- ◆ Peace Bridge welcomes approx 400/mos

Socio-Economic Profile

- ◆ Average earnings are Significantly lower (27,999) compared to Ont. average (35,185)
- ◆ 16.8% of pop'ln aged 20 –34 had < High School
- ◆ 6.2% are unemployed (Ont 6.1%)

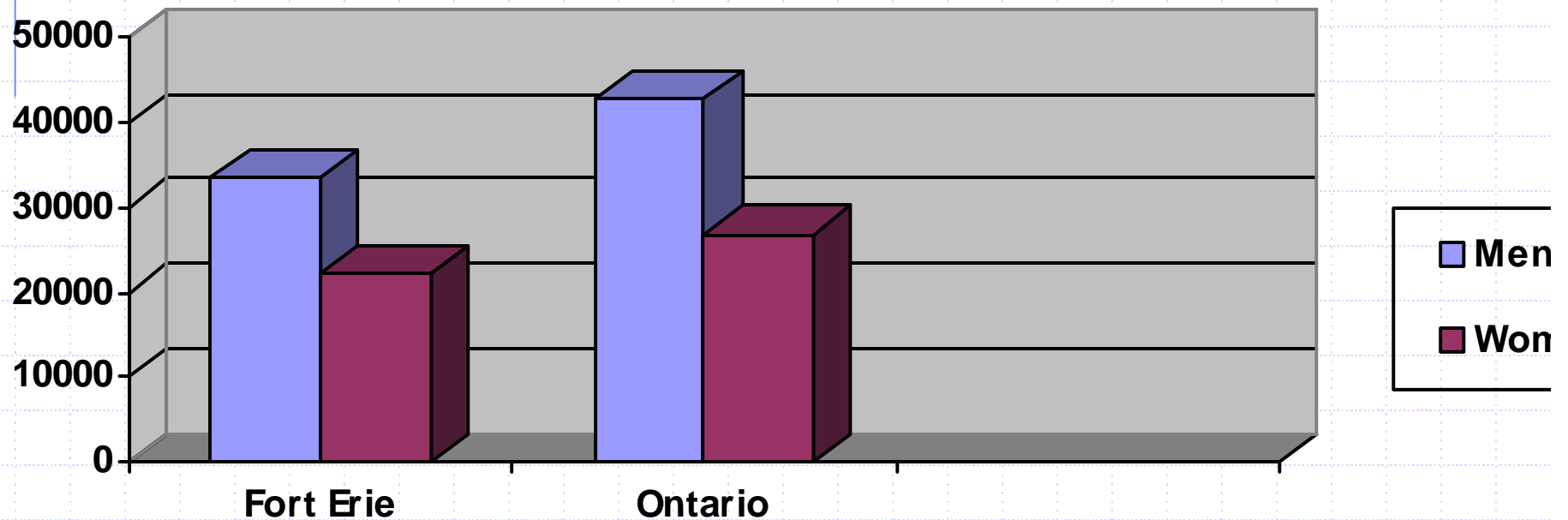
Age Demographics



Average Earning Statistic by Gender

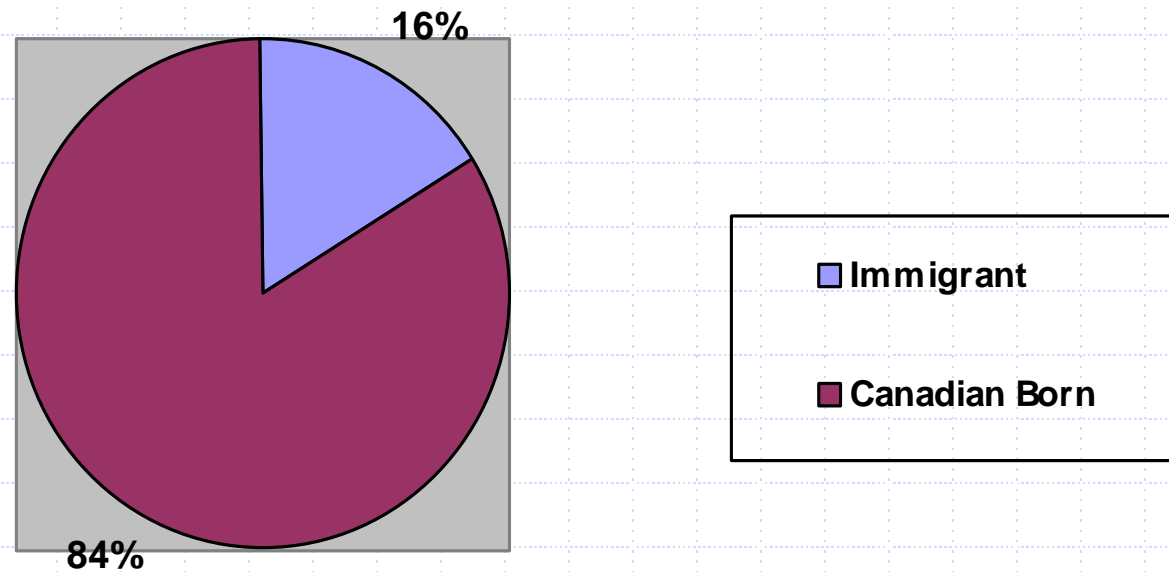
◆ For all persons with earnings

(for all persons with earnings)



Newcomers to Fort Erie

◆ Newcomer distribution





Initial Driving Force

The Community Health and Wellness Group and Plan were created in order to respond to:

- ◆ Primary Care Physician deficit
- ◆ Threats to the local hospital

The Premise is that...

- ◆ Health professionals were more likely to move to communities that were active and participating in managing their own health and health care
- ◆ We would be better able to advocate for our share of the health care resources if we know our needs and could articulate them.

So we decided to:

- ◆ ** Adopt a Systematic validated approach PRECEDE – PROCEDE
- ◆ Focus on describing the level of health we have as a community –
8 “ Determinants of Health”
- ◆ Organize the info gathered to draw an accurate picture of our level of well-being (community mapping)

The first 4 steps involved...

- ◆ ** critical analysis of the evidence
Population Health, Mapping and Measurement techniques, at the same time this had an effect of **Community Capacity Building**
- ◆ Analysis of Legislation
- ◆ Expert opinion (Public Health, Social Services and Municipal Leaders)

First 4 steps involve....

◆ ** **COMMUNITY CONSULTATION!!!!**

◆ Political Backing

◆ Funding identified and secured

◆ Communication Plan

◆ Real time evaluation

(* * **Building Communities from the Inside Out**)

John Kretzman John McKnight

The Teams (8)

- ◆ Health of Small Children

- ◆ Health of Youth

- ◆ Housing

- ◆ Education and Literacy

- ◆ Health of People over 50

- ◆ Health of the Environment

- ◆ Access to Health Care

- ◆ Mental Health

Threaded throughout this assessment is the issue of...

- ◆ Transportation / Geography/Mobility
- ◆ Significant literacy issues
- ◆ Influential Socio-Economic factors
- ◆ Minimum of available local data
(integrated into Regional data)

We have the unique advantage in that....

- ◆ Have a strong history of volunteerism and commitment to community
(ESPECIALLY OVER 50 AGE GROUP)
- ◆ Evidence of strong value of children and family life

Social Capital is... **

- ◆ Relationships among people, groups and organizations that result in trust in each other and the ability to respond as a community for the good of all it's citizens

Why is the Measure of Social Capital so Important?

- ◆ The larger the Social Capital
 - ◆ The Healthier we are and
 - ◆ The More Socially Prosperous we are....
-
- ◆ **Each individual is enabled to influence their own determinants of health**

Population Health**

- ◆ PH refers to the health of the population as measured by validated health status indicators
- ◆ PH is influenced by the Determinants of Health over a lifetime
- ◆ A PH approach addresses the entire range of individual and community factors that determine health

*(**Health Canada Population Health)*

Measuring Approach**

- ◆ Qualitative spring 2002 (ask the community)
- ◆ Social Capital Survey (Dec 2002)
- ◆ Health Status Survey (Canadian)
- ◆ Lifestyle Risk Factors
- ◆ Each Team developed/identified validated reliable indicators (*best practice and the literature*)
- ◆ Census Canada (2001)

We have used a theory based approach for each team so that....

We can compare our information to evidence in the research or

“Best Practices”

Key Documents

- 1) Building on Values. The Future of Health Care in Canada Roy J Romanow Nov 2002
- 2) Ottawa Charter 1986 WHO
- 3) Health Care Reform and Reform for Health: creating a health system for communities in the 21st century. Treavor Hancock. Futures 31(417-436) (1999)

PRECEDE

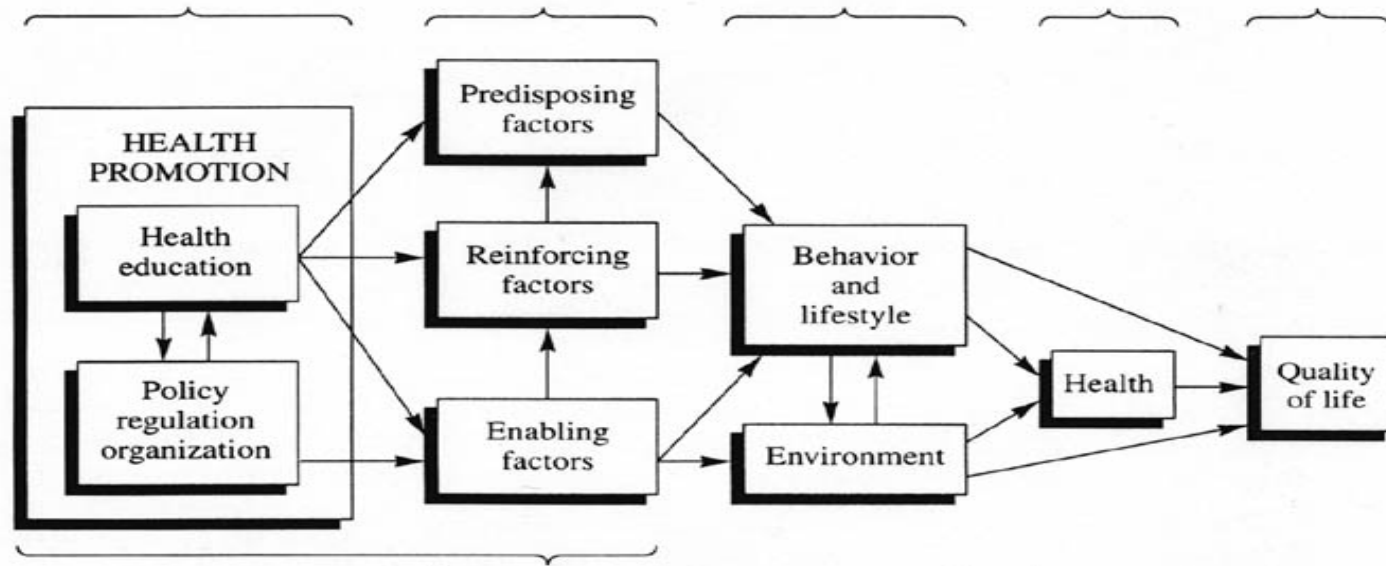
Phase 5
Administrative and policy assessment

Phase 4
Educational and ecological assessment

Phase 3
Behavioral and environmental assessment

Phase 2
Epidemiological assessment

Phase 1
Social assessment



Phase 6
Implementation

Phase 7
Process evaluation

Phase 8
Impact evaluation

Phase 9
Outcome evaluation

PROCEED

January 2004

Phase 5 of PRECEDE PROCEDE

- ◆ **Administrative and Policy Assessment**
- ◆ Present the completed picture to the Council and Community to facilitate policy and decision making Feb 9th
- ◆ Decide as a community if we want to implement our recommendations
- ◆ Ultimately the plan will enable us to influence our own determinants of health

Ottawa Charter 1986

A Healthy Community has...

- ◆ Health Promotion
- ◆ Supportive Environments
- ◆ Strengthen Action (Political, Leverage, Funded)
- ◆ Personal Skills
- ◆ Re-Orientation of Health Services (based on prevention /health promotion)
- ◆ Evaluation/ continuous and outcome

Some Outcomes

- ◆ Heart Health (cardiac rehab program)
- ◆ FAST for adolescent parents
- ◆ Urgent Care Centre
- ◆ Nurse Practitioner for small children
- ◆ 130 people involved and knowledgeable re: Population Health
- ◆ Significantly enhanced connections to Regional Services and Brock University

Health of Youth.....

- ◆ Assests Based Approach

What exists within our town that supports healthy development of youth?

How well do we do? Can we enhance it?

- ◆ Interviewed agencies

- ◆ Focus groups for Youth

- ◆ Brock YLC CURA data

Health of Youth results...

- ◆ A place to gather.....
- ◆ Organization of Youth agencies for cohesive effect (2.1 million spent per annum)
- ◆ Disabled older youth disconnected
- ◆ Access to recreation-specifically Arts and Culture
- ◆ Undefined influence of alcohol and drugs
- ◆ Significant Socio-economic and Lifestyle risk factors

Lifestyle and Risk Factors Study 2003

- ◆ Self –assessed ratings of :
- ◆ overall health,
- ◆ quality of life,
- ◆ satisfaction with health and
- ◆ activity limitations

were correlated with lifestyle

www.communityhealth.forterrie.ca > **Feb 11th**

The Work in 2004

- ◆ Build an Implementation Plan that is "
 - Evidence based
 - Created and supported by the community
 - Contributed to the development of the Municipal Plan (policy and bylaw support- sustainability)
 - Can be evaluated for Social Return on Investment
 - Works to enhance development of our Social Capital

Ultimately

- ◆ Enable each individual in our community to influence their own determinants of health and access resources and services to look after their health



Healthy Individuals

A Healthy Community

Prosperity