



2019 Community Health Plan

This Health Plan is submitted by the seven Community Health Boards (CHBs) within Central Zone (Halifax area, Eastern Shore and West Hants) and contains our joint priorities and recommendations.



In this plan, we offer four priorities:

- Access to health services and information
- Working together upstream
- Wellness and health promotion
- Supportive community

We wish to note that several factors underlie all of these priorities. They are:

- Poverty
- Urban/rural divide
- Loneliness

As CHBs, we bring the Social Determinants of Health focus to our work and are acutely aware of how these underlying factors impact the lives and health of individuals and communities. We are also aware of the many ways these factors (outside the health care system) impact the effectiveness of policies and programs developed by the health system for their patients, clients and families. We ask that you consider these factors and their impacts when evaluating and developing policies and programs.



For those on income assistance, benefits do not keep pace with the cost of living, forcing people to compromise on food, shelter, transportation and health care.”

What we did

As CHBs, we are in ongoing contact with our communities. We frequently meet with, talk with, and hear from individuals and groups. These interactions provide background, insight and context for the data gathered during the formal health plan consultation process.

For this formal process, we used three main sources of information:

- Existing data, such as community profiles and community health surveys.
- Our online survey available in English, French and Arabic.
- Extensive consultations in our communities, including 43 meetings with community groups and nine Talk About Health sessions.

In all, well over 1,000 volunteer hours have gone into developing this plan.

Our community consultations and communications produced an enormous amount of information and gave us insight into how the health system affects the day-to-day lives of the people in our communities. We heard heartbreaking stories about the difficulties people encounter when trying to access services for themselves or their families. People spoke honestly and passionately about their suffering and frustration.

It has been our privilege to meet with, listen to and work with the people in our communities. We have done our best to reflect their voices in our priorities and recommendations.

What we heard:

PRIORITIES, RECOMMENDATIONS AND POTENTIAL ACTIONS FOR EVALUATION

In this section, we briefly describe our four priorities and the recommendations that flow from them. Because, as CHBs, we have neither the capacity nor the resources to evaluate NSHA Central Zone's response to our recommendations, we've included examples of actions – requested by our communities – that will indicate to us that the NSHA Central Zone is moving forward with our recommendations. We look forward to working with the NSHA Central Zone to develop indicators for evaluation with future health plans.



It is important to provide more education and training on accessibility for staff to enhance their awareness and skills regarding working with persons with disabilities.”

PRIORITY: EQUITABLE ACCESS TO HEALTH SERVICES AND INFORMATION

Access was an overwhelming theme of our consultations and it covered a lot of territory. People told us they find services of all kinds difficult to access. This was a particular problem for diverse populations and rural communities. As well, people had great difficulty navigating a complex health system. People cited many barriers to access, including:

- Lack of empathy on the part of health care providers
- Fear and stigma
- Communication issues
- Transportation issues

Recommendation #1

Seek creative, innovative ways to reduce barriers and increase access to services in the community.

POTENTIAL ACTIONS FOR EVALUATION:

- Increase Community Health Team programming in underserved rural and culturally unique communities in Central Zone.
- Reduce wait times for services – especially mental health, affordable home care and assisted living.
- Develop a community information strategy in partnership with CHBs to improve access and navigation of the health system.
- Address the reasons why people of all abilities and cultures are not accessing programs and services.
- Consider transportation barriers when planning programs and services.
- Provide more services in local communities.



I don't have a family doctor; it's hard to know if you're getting proper care if you're always going to walk-in clinics and meeting the doctor for the first time.

Recommendation #2

Develop a more culturally competent health system.

POTENTIAL ACTIONS FOR EVALUATION:

- Include social and cultural identifiers when collecting population health data.
- Offer training and education to improve or remove cultural barriers to patient-provider interaction, and to enhance awareness and skill in working with people with disabilities and members of the LGBTIQ+ community.
- Support the development of a more diverse workforce.
- Implement culturally safe and supportive policies and programs.
- Use the Nova Scotia Health Equity Lens in all aspects of health planning, policy development and service delivery.

Priority: WORKING TOGETHER UPSTREAM

People asked for bigger picture thinking. They want NSHA Central Zone to look at and address the underlying causes of ill health. For example, helping people access jobs through training means people can afford better food, healthier lifestyles, and better mental health strategies. This is an “upstream” approach – investing in strategies that will lead to better health in the future, rather than focusing solely on the ill health that results when the Social Determinants of Health are ignored.

Upstream approaches require Interdepartmental, intergovernmental and interagency communication and co-operation. Our communities want NSHA Central Zone to embrace this approach.



We want to see more cooperation between Departments about health issues. Rules around Social Assistance are bad for your health.

Recommendation #3

Take the lead in working collaboratively with provincial departments , municipal governments, and community partners to address the social determinants of health.

POTENTIAL ACTIONS FOR EVALUATION:

- Increase collaboration with other departments and agencies.
- Improve programs and policies that impact the Social Determinants of Health for those in greatest need by working with other departments and agencies.
- Create awareness of the Health Equity Lens with decision makers.

Recommendation #4

Work with community stakeholders, academia, municipalities, and provincial departments to support and develop strategies to ensure equitable access to safe foods.

POTENTIAL ACTIONS FOR EVALUATION:

- Bring stakeholders together to address food insecurity.
- Liaise with CHBs as important community voices in the development of a Nova Scotian food security action plan.
- Increase access to education about nutritious food.
- Recognize the impact of food insecurity on health in planning and policy development.



*We need to **strengthen connections and work together.***

Priority: WELLNESS AND HEALTH PROMOTION

Many people are making a real effort to be physically active, to eat well, and generally to lead a healthier life, but they often face barriers. For example, poverty is a pervasive issue. People told us that they can't afford to buy healthy food or take advantage of recreational and physical activities.

Because of distance and lack of infrastructure, rural communities need more resources to support community projects that help people be active and eat well.

People recognized mental wellness as a serious concern and asked for programs and approaches that support mental wellness.



*We need a **continued emphasis on trails with both summer and winter outdoor activities.***

Recommendation #5

Support community-based physical activity opportunities.

POTENTIAL ACTIONS FOR EVALUATION:

- Reduce environmental and institutional barriers that impact physical activity.
- Support the development of more walkable spaces, bike routes and other active transportation options.
- Offer programming in partnership with existing groups, especially in outlying areas and culturally unique communities.
- Advocate for increased access to existing facilities and programs for physical activity.



*The Community Food Centre is a **GREAT initiative** – I’d really like to see more things like this – for the people, by the people initiatives.”*

Recommendation #6

Invest in local and culturally appropriate programs that support mental wellness.

POTENTIAL ACTIONS FOR EVALUATION:

- Increase support for local programs focusing on mental wellness.
- Support unique approaches and offer culturally appropriate programs.
- In partnership with the IWK, place a high priority on primary prevention programs and interventions for children, youth and individuals who are at risk for developing mental illness.

Priority: SUPPORTIVE COMMUNITY

A sense of community is crucial to well-being. People want to feel more of a sense of belonging in their neighbourhoods. Emotional support, peer support and social support networks are badly needed, especially for newcomers, youth and young families. Many immigrants, racial and ethnic groups, and people with disabilities feel excluded from community networks. They are not on committees or boards and do not feel that they are a part of the system. Some marginalized groups do not feel welcome in the health system.

People asked for more government funding for community groups that have taken on responsibility for building supportive communities.



We need more engagement opportunities for youth and programs to build relationships.”

Recommendation #7

Invest in community-led health promotion initiatives.

POTENTIAL ACTIONS FOR EVALUATION:

- Increase resources for community groups to implement local health initiatives.
- Adequately resource and partner with CHBs to play a key role in strengthening supportive communities.
- Increase Wellness Funds to support community initiatives.

Recommendation #8

Support and partner with communities, non-profit and other sectors to engage individuals to build a sense of belonging and foster inclusion.

POTENTIAL ACTIONS FOR EVALUATION:

- Increase diverse representation – for example, age, culture, gender, language and abilities – on boards and decision-making bodies.
- Increase engagement with rural and diverse communities.
- Include community input in health system decision making.
- Consider the impact that being a part of a community has on health when developing policy.



We need to see more people that look like us in the health care system providing our care.”

Conclusion

We'd would like to acknowledge the work NSHA Central Zone has done in acting on the recommendations of the 2013 Health Plan, especially in regards to expanding the Community Health Teams that are playing an increasingly central role in our communities. We hope that this support and expansion will continue.

We'd would also like to thank NSHA Central Zone for their efforts to address the health needs of the Syrian refugees, specifically the Transitional Health Clinic, and congratulate you on the award given to you by the Immigrant Services Association of Nova Scotia (ISANS) in recognition of these efforts.

We hope that you will continue to collaborate with the CHBs and continue to work with us as a way to connect with our communities. We look forward to working together to address our communities' priorities and recommendations.

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“Lack of access to local markets prevents people from eating as healthy as possible.”

Who are the Community Health Boards?

The seven Community Health Boards in Central Zone are made up of volunteers from all walks of life. Members reflect the diversity of the communities we serve.

We believe that good health is much more than the absence of disease. We recognize that the Social Determinants of Health – factors including income, equity, education, housing, the environment, community support, and meaningful work – play an essential role in the health and well-being of our communities.

We talk with people in our communities and we listen to what they tell us is important to their health. We work with NSHA Central Zone and local organizations to support and promote health and well-being in our communities.

