A B S T R A C T

The People Assessing Their Health (PATH) Project was designed to provide a means for people in selected communities within Eastern Nova Scotia to become more involved in decision making within the province's emerging decentralized health system. Using community health impact assessment (CHIA) as a population health strategy, community members were able to identify factors that determine their health and to develop tools to help them assess the health impact of programs and policies within their communities. The participatory process used throughout the PATH Project enabled a wide range of people to generate information for designing a community health impact assessment tool (CHIAT) unique to their community. It also helped participants to broaden their understanding of the many factors determining health of their community and of the region.

A B R É G É

Le *People Assessing their Health Project* (le projet des gens évaluant leur santé) a été conçu pour les populations de certaines communautés, situées dans la secteur est de la Nouvelle-Écosse, et ce, afin de leur permettre de mieux s'impliquer dans le nouveau réseau des services de santé. En se servant du modèle évaluatif 'health impact assessment', les participants ont été appelés à identifier les facteurs déterminants jouant sur toute question de santé publique. Ces mêmes participants ont été, dans un deuxième temps, habilités à développer des outils évaluatifs adaptés aux besoins propres de chaque communauté. Pour fournir une banque de données des plus riches, le processus employé durant le projet a favorisé l'inclusion d'un grand nombre de personnes. Enfin, un volet important, implicite dans ce projet d'études, a été de favoriser, chez les participants, une meilleure connaissance des facteurs déterminant la santé publique, soit au sein de leur communauté, soit dans toute l'étendue de leur région.

The 'People Assessing Their Health' (PATH) Project: Tools for Community Health Impact Assessment

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For years, residents of Eastern Nova Scotia have faced many barriers to maintaining and promoting their health because of geographic isolation and socio-economic conditions. The purpose of this article is to describe how the People Assessing Their Health (PATH) Project enabled members of three communities in Eastern Nova Scotia to identify factors that determine their health and to develop tools to help them assess the health impact of programs and policies within their communities.

Nova Scotia, like other Canadian provinces, has been caught in the wave of health system reform – a wave that promised, among other things, more community involvement in decisions that determine health.¹ The PATH Project was conceived when the Department of Health was shifting towards decentralization and regionalization. New governance structures were proposed as a means to enable greater citizen involvement in decision making at regional and community levels. Acting upon the Nova Scotia's Blueprint for Health Report² released in 1994, four regional health boards were created and a network of community health boards began to unfold within these health regions. Community health boards were intended to determine local priorities for

improving health of the community and to plan for primary health care. Health was broadly defined to include the many factors that determine health, not just health services.

Situated within this context of health reform, the goal of the PATH Project was to provide a means for people in selected communities within the newly formed Eastern Health Region to identify, define, and assess all aspects of health in their communities in order for them to become effective participants in the emerging decentralized health system.

Community health impact assessment

Community health impact assessment (CHIA) was chosen as a strategy to increase public understanding of the broad determinants of health and, through this educational process, to empower citizens to have an active voice in decisions influencing their health. Frankish et al. (1996) have defined health impact assessment as any combination of procedures or methods by which a proposed policy or program can be judged as to the effects it may have on the health of a population.³ This population health strategy has been used to varying degrees across the country.^{2,4} It enables government departments to work across jurisdictional boundaries to consider the broad spectrum of factors that determine health, thus assisting policy makers as they make decisions about the impact of their programs and policies on the health of the population they serve. As community members are given more responsibility for decision making, they need both the decision-making support structures, such as community health boards, and the appropriate tools to enable their informed participation in health decisions.

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The PATH Project was sponsored by the Antigonish Women's Association, Public Health Nursing Services of Nova Scotia's Eastern Health Region, and the Extension Department of St. Francis Xavier University. It was funded under the Health Promotion Contribution Fund, through the Health Promotion and Programs Branch, Atlantic Region, Health Canada.

During the PATH Project, groups of participants in each of three selected communities identified health determinants and designed community health impact assessment tools (CHIATs) suitable for their community. Each CHIAT was intended to

- Answer the question *what does it take to make and keep our community healthy?*
- Examine the broad spectrum of factors that determine health – not only specific interests.
- Provide a clear message about what community members consider important in building a healthy community.
- Encourage all community members to become involved in decisions about their community's programs and policies.
- Reflect community concerns and priorities so citizens can make better decisions.
- Be used along with the community health plans developed by community health boards to guide decisions for primary health care.

The PATH process

As important as the tools themselves was the participatory process used in developing the CHIATs. The process began when the three partner organizations formed a regional advisory committee bringing together community development leaders from across the Eastern Health Region with representatives of the partner organizations. This committee established criteria for selecting communities, suggested potential communities and local leaders to contact, and provided advice throughout the project. Once the three communities were identified, the committee expanded to include representation from each. The three PATH communities included a rural Cape Breton community, an isolated coastal community from mainland Nova Scotia, and a multicultural urban community located in the core of industrial Cape Breton.

The key activities of the PATH process can be summarized in the following four steps.

Step 1: Building the Community Process

In collaboration with leaders in the proposed communities, the project coordinators held public meetings to determine

interest in participating in the project. Once interest was confirmed, a community-based committee was formed to select one local person to facilitate identification of health determinants and development of the CHIAT. The choice of a person who knew the community, rather than a trained facilitator unfamiliar with the community, was considered key to the success of the community process. The three half-time community facilitators were supported during their nine-month term by two half-time project coordinators through team meetings, site visits, regular correspondence, and training sessions. Training topics included group dynamics, small group facilitation, communication, active listening, group decision making, story-telling/structured dialogue, and participatory data-analysis techniques.

With local steering committees guiding them, the facilitators gathered people together in kitchens and community halls to talk about what makes their community healthy. Because they knew their communities well, the facilitators were able to work through existing organizations, local leaders and resource people, schools, churches, and health centres using local media and informal communication channels.

Step 2: Facilitating Community Discussion

The PATH Project was grounded in the belief that community people know what it takes to make their community healthy. To gather data, the community facilitators employed a variety of strategies such as story-telling, focus groups, children's artwork and a telephone survey.

Participants were not given a list of determinants of health; instead, adult education techniques were used to stimulate discussion about the wide range of factors. For example, at the beginning of the discussion the group was given a small box containing familiar items that could be easily associated with various determinants of health, such as a notebook symbolizing education and a toy telephone for social support. The facilitators encouraged participants to consider all aspects of health in order to elicit community members' insights into health, not their reactions to a predetermined list of determinants.

The purpose of the community discussion was not only to gather data for developing the CHIAT but also to provide an opportunity for community members to broaden their understanding of factors determining health in their community. To this end, the technique of story-telling, adapted from the structured dialogue approach used by other Canadian health promoters, worked well.⁵ Modeled on principles of adult education, the story-telling strategy encouraged participants to identify factors that influenced their health by sharing stories based on their life experience in their community. The small group discussion process enabled participants to reflect upon what they heard, to develop new understandings of health, and to identify future actions needed to support health in their community. Thus, community members participated in the generation and analysis of the information that served as the base for their CHIAT. The facilitator worked with members of the steering committee to identify clusters of themes that reflected key determinants of health in their community.

Step 3: Designing the Tool

Each PATH community steering committee was challenged to design a tool that would have meaning to their residents and would be used in making decisions. Not knowing what such a tool would look like tested their imagination and creativity. The following were suggested as important components of a CHIAT:

- A vision statement for a healthy community
- A summary of key determinants of health in the community
- Other factors that are important in building and sustaining a healthy community
- A statement of the values and principles that guide community members as they work together
- Worksheet for health impact assessment which states what community members consider a priority when decisions are made about programs and policies that could impact on their health
- Worksheet for planning actions
- Illustrations or prose that capture their sense of community
- Description of the process
- Acknowledgements.

Tools were drafted and then pre-tested in community workshops. Suggestions were incorporated into the final CHIAT. These workshops also provided an opportunity for participants to identify strategies for supporting use of the tool and for continuing to work together to build a healthy community.

Step 4: Supporting Community Use of the Tool

Involving a wide range of people from the community in the development of the tool was the first step in supporting its use. However, it was also important to distribute the CHIATs widely to local leaders, organizations and decision-making bodies within the community including community health planning groups and municipal decision makers. People who served on the steering committee worked with these groups to ensure continued use of the tool.

Outcomes

The three PATH communities succeeded in developing tools in the form of booklets that portrayed the unique character of each community. Although the tools were based on perspectives of people in each PATH community, all of the CHIATs identified similar categories of health determinants. The most important determinant recognized by all three PATH communities was jobs/employment opportunities. This was followed, in no order of importance, by healthy child development, lifelong learning, lifestyle practices, physical environment, safety and security (fire and police protection), social support, stable incomes, and health services (including acute care, home care, and primary health care).

Another set of factors was mentioned just as frequently as these determinants of health. The second set described factors considered to be key in building healthy and sustainable communities. These included communication (lack of information and poor communication are barriers to assuming greater community control); community involvement, local control, and opportunities for leadership development; confidence in one's community; coordination and cooperation in service delivery; ethics, values and spirituality; and respect for one's culture and history.

A resource entitled *PATHways to Building Healthy Communities in Eastern Nova Scotia* was developed out of the experiences of the three communities. The resource suggests various approaches communities can take in addressing factors that determine their health and in working towards building a healthier community. It also contains the three community tools.

Lessons learned

The PATH Project provided a unique opportunity for health promotion innovation and resulted in a number of valuable lessons about implementing health impact assessment as a community health strategy. Although these lessons have evolved from the experience of people living in the three PATH communities, they have relevance to others involved in similar community health development initiatives.

- The participatory process used throughout the PATH Project enabled a wide range of people to share the meanings they gave to health based on their experiences of living and working in their communities. Not only did the group process generate information for designing the CHIAT, it also helped participants to expand their understanding of factors determining health of the broader community. For many, it helped shift their thinking beyond the illness problems of individuals to an examination of how programs and policies could support or weaken health.
- People in the three selected communities identified similar factors determining health. Furthermore, this list of factors is relatively consistent with the determinants of health articulated in the population health framework recognized in Canada today. However the second, and just as noteworthy, set of factors identified by community members addresses issues related to what they see as socioeconomic inequalities in their communities, their sense of control over their health, and their capacity to actually build a healthy community.
- The project demonstrated the value of developing CHIATs as a strategy to support community action on health. Participants were moved to identify directions for future action as they dis-

cussed factors determining their community's health. Working together to create something as concrete as a CHIAT kept community participants interested and involved.

- The participants from the three communities who were involved in developing the CHIATs developed a greater understanding of each other's community health issues and of the challenges facing the region. The process helped to create a common understanding needed for the critical analysis of factors impacting on the health of the whole region.
- The PATH Project was timely because it supported community involvement in health decisions in anticipation of the province's shift to decentralized decision making. On the other hand, its implementation was too early because, in reality, the proposed governance structures to support citizen involvement in health decision making did not proceed as quickly as expected. Midway through the life of the project the provincial government, focussing on cost containment within the health system, halted the designation of community health board representation on regional health boards, thus disabling any significant system-wide shift to community participation in decision making. Without government commitment to involving citizens in decision making and thus, in creating healthy public policy drawing on more than a top-down approach, community health impact assessment lost much of its relevance and appeal.

SUMMARY

Launched at a critical time in the health reform process, the PATH Project challenged people to think more about factors impacting on their health and about how these factors can be considered when program and policy decisions are being made. The PATH Project created a broader understanding of the varied aspects of health, of health determinants beyond health care services, and of what it takes for local citizens to build a healthy community. Above all, it revealed how important it is that the public and policy makers work together to create both the decision-

making structures and the tools for community participation necessary to support health in a region where inequalities exist in health status and accessibility to the socio-economic conditions that support health.

ACKNOWLEDGEMENTS

The author is indebted to members of the PATH Project's regional advisory committee, facilitators and steering committee members in the three project communities, and Peggy Mahon, co-coordinator of the project.

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