Healthy Communities and Nursing: A Summary of the Issues

What’s the issue?

It has been accepted for many years (certainly in Canada since the groundbreaking Lalonde Report in the 1970s) that “health” is the product of many different, but interrelated factors – biological, social, environmental, cultural and economic. Other factors are where a person lives, their level of income and what they eat. Equally important is that people have a say in the decisions that affect their well-being. In fact, the actual health care system has a very limited impact on an individual’s health.

Individual communities make decisions that affect people’s health. These include pollution control, safety and security, water quality, recreational opportunities, transportation, the natural environment, economic development and employment opportunities, education and skills development, cultural and spiritual recognition, and accessibility of health and social services.

As a result of its decisions, a community is either “healthy” or not, and a major determinant of a person’s health is whether he or she lives in a healthy community.

Some qualities of a healthy community include:

- access for all citizens to food, water, shelter, income, safety, work and recreation;
- access to health and social services;
- access to recreational spaces;
- a clean and safe physical environment;
- opportunities for learning and skills development;
- workplaces that support individual and family well-being;
- participation of residents in decision-making;
- recognition of cultural and spiritual heritage; and
- a diverse economy with employment opportunities.

(Ontario Healthy Communities Coalition, n.d.)

Healthy Communities – a local process and a worldwide movement

The Healthy Communities process was developed in Canada, building on the pioneering work of leaders in urban planning and community health such as Jane Jacobs (1961), Trevor Hancock and Len Duhl (1988a; 1988b). Jacobs wrote about issues such as what makes streets safe and unsafe, what constitutes a neighbourhood, and why some neighbourhoods remain impoverished while others regenerate themselves. Following the 1984 conference, Beyond Health Care, which for the first time examined the role public policy in all sectors can play in
promoting health, the city of Toronto created the first Healthy City Office. Health Canada launched a Healthy Communities project in 1987, and the World Health Organization (WHO) established the Healthy Communities program soon afterwards.

Today, over one hundred cities and towns in dozens of countries around the world have introduced “health” as a criterion in their decision-making processes. In Canada, provincial Healthy Communities networks exist to support initiatives, primarily in Quebec and Ontario. The movement is strongest in Quebec, where many municipal leaders (mayors and councillors) have formally committed their governments to follow the Healthy Community process. This process includes an intersectoral approach that makes “health” a major focus for policy-making and citizen engagement at the municipal level.

A Healthy Community process includes the following components:

- wide community participation
- involvement of all sectors of the community
- local government commitment
- creation of healthy public policies.

(Ontario Healthy Communities Coalition, n.d.)

In healthy communities, sectors like education, health, recreation and economic development work together to address common health goals and/or improve the health status of the population of the community.

**Why is this issue important?**

**How this issue relates to the health of Canadians**

Municipal government policies can reduce the risks of disease and can promote wellness. The Healthy Communities process supports the development of a broad range of policies at the local level that can have a positive impact on health. The process involves all sectors in creating healthier living conditions.

Some examples include:

- “Public Spaces – Family Places”, an initiative of the National Children’s Alliance and the Federation of Canadian Municipalities, recognizes the importance of high quality, safe and accessible recreational opportunities for children and youth. This initiative supports the development and maintenance of community play spaces, recreation opportunities and family-oriented community centres, as well as the active engagement of community members. (National Children’s Alliance, 2004)

- Planning new “mixed purpose” neighbourhoods, where residents can live, work and shop in the same area, minimizes the need for private vehicles, lowers air pollution and energy consumption, and reduces commuting times.
• Community economic development initiatives help communities address both social and economic goals by providing employment and training opportunities for groups that face barriers to employment. When these people are able to get and keep jobs, their health status tends to improve because they are able to afford better food and better housing.

How this issue relates to the functioning of the health care system
Some healthy public policies adopted by communities can result in significant savings to the health care system. For example:

• A change to the way sidewalks are plowed and maintained in the wintertime can result in fewer falls, and therefore fewer injuries and long-term disability to groups such as seniors.

• Designating some urban land as community gardens can give lower income families, without access to land an opportunity to grow their own produce, increase their access to nutritious food, and expand their social networks.

• Municipal “report cards” generate public interest and discussion on the health and quality of life in a city or town, and on the initiatives that are being developed to deal with these issues.

Why is this issue important to nurses?
The Healthy Communities process is important to nurses and other health workers because it deals with many of the determinants of health that are outside the scope of the health care system. Implementing policies to provide greater access to nutritious food and recreation, for example, would have a tremendous positive impact on health status.

Nurses are often in the best position to see the cumulative effect of a health issue in the community. If they work consistently with people from the same neighbourhood or with people from the same age group, nurses can use their observational and analytical skills to put together a picture of the health risk in the community. They can then help to organize action(s) or promote political decisions to address this risk.

For example:

• Nurses and physicians working in an inner city neighbourhood identified the symptoms of lead poisoning among children in the area. They were successful in working with the local community and politicians to get a battery plant closed down.

• Nurses at a community health centre noticed that several of their senior clients had taken bad falls in the area and broken their hips or legs one winter. They worked with the community developer and the seniors to identify the most dangerous stretches of sidewalk, and convinced the city to change the way it plowed and sanded these stretches.

• A public health nurse helped a seniors’ group to research and to present its concerns about the lack of affordable housing for seniors to the local city council. As a result, the council amended its policy to improve access to affordable housing.
In many communities across Canada nurses have played roles in creating Healthy Communities including:

- Identifying health issues in the community.
- Helping community members investigate health issues, and then organize and present these issues to the appropriate authorities.
- Lending their expertise to advocate specific issues.
- Building coalitions with other sectors, such as education, housing and recreation.

What has CNA done to address this issue?

CNA is active on many committees and coalitions that support the Healthy Communities process including:

- CNA is a partner of Child and Family Canada that provides quality, credible resources on children and families.
- CNA is a founding member of the Canadian Coalition for Public Health in the 21st Century.
- CNA is a member of the National Children's Alliance.
- CNA was on the Expert Advisory Board for Children's Health team, which reported to the Commission for Environmental Cooperation.
- CNA acted as a member of the Advisory Committee on the Respecting the Air We Breathe Project.
- CNA is a member of the Environmental Health Coalition.
- CNA is a member of the Canadian Coalition for Green Health Care.

CNA has developed policy papers and position statements that support the Healthy Communities process including:

- Position statement titled *The Environment is a Determinant of Health*;
- Policy statement with the Canadian Medical Association, *Joint CNA/CMA Position Statement on Environmentally Responsible Activity in the Health Sector*;
- Resolutions on: 1) Chemicals, pesticides and radioactive materials; and 2) Disposable items in health facilities.

What can nurses do about this issue?

*In their professional practice, nurses can:*

- Listen carefully to what clients/patients say about their workplaces, housing and neighbourhoods, and consider how these issues might affect their health.
- Look for patterns among clients from the same neighbourhood or same age group.
• Become informed about initiatives in the community that deal with local health issues.
• Think broadly and look for the connections between sectors. Health is about much more than health care!
• Participate in multidisciplinary and multisectoral coalitions and committees.
• Work with community members to advocate for healthier communities.
• Assess community issues with a healthy public policy lens.

As citizens nurses can:
• Speak out about issues of concern. Your knowledge and your perspective as a health professional and a citizen are important.
• Contact the mayor or city/town councillor about issues that relate to the health and quality of life in your area.

Where can you go for further information?
• The Ontario Healthy Communities Coalition has a number of resources available on its website on the following topics: starting a Healthy Community process, working with local governments, building inclusive organizations, environmental health, evaluation of Healthy Community initiatives, and food security (www.healthycommunities.on.ca). Regional animators are also available to assist municipalities and community groups.
• The Réseau québecois de villes et villages en santé has an extensive set of resources available (mainly in French) addressing the following topics: general documents and success stories, physical activity, housing, seniors and intergenerational projects, community economic development, education and culture, family, environment, youth, battling poverty, safety, community solidarity and belonging, and transport (www.rqvvs.qc.ca).
• The Quebec World Health Organization (WHO) Collaborating Centre on the Development of Healthy Cities and Towns has done research on the Healthy Communities model and process (www.rqvvs.qc.ca/OMS/Anglais/anglais.htm).
• The Healthy Cities and Urban Governance Program of WHO has resources and research papers (www.euro.who.int/healthy-cities).
• The Healthy City Office of the City of Toronto, as well as other cities in the Ontario and Quebec networks, have produced “State of the City” reports that measure the progress made on all the indicators of a healthy city.
References


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