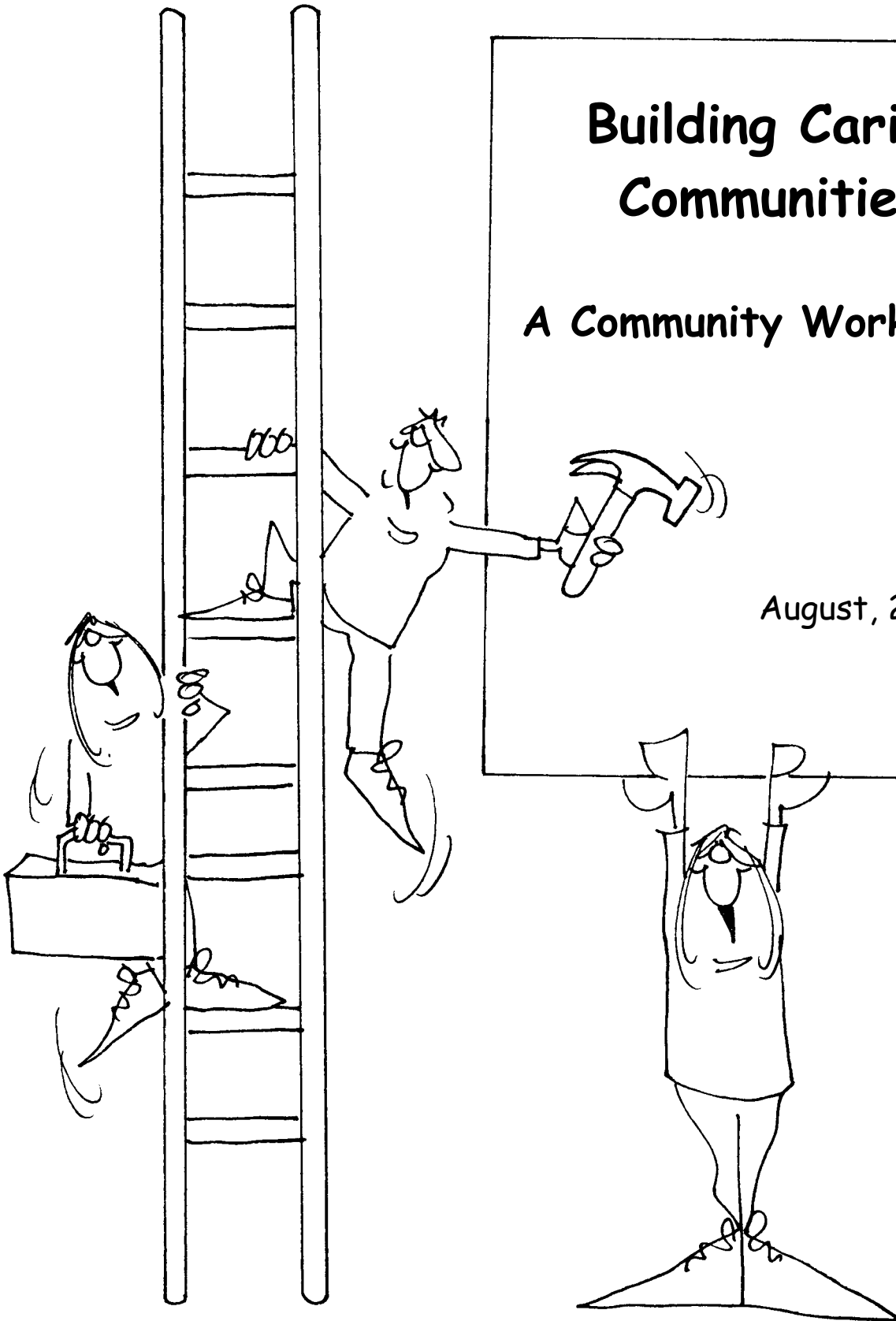# Building Caring Communities

A Community Workbook

August, 2002

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We Welcome Feedback

We would like your feedback on this workbook. Please help us by filling out this form and sending it to:

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1. What are the strengths of the Building Caring Communities Workbook?

2. What would you change about the Building Caring Communities Workbook?

3. How did you use this workbook in your community or workplace?

4. Other comments:

Your Name: _____   Phone: _____ Fax: _____

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Building Caring Communities in Action

The Beginning of Building Caring Communities

Building Caring Communities began early in 2000, when the service area population health team in three southeast Saskatchewan health districts recognized that the traditional approach to health and community well-being has many limitations. The traditional approach is problem- and deficit-based. Communities do needs assessments identifying all the community's deficiencies and problems. The health educators believed that focusing on population health and community strengths is a more constructive approach and more likely to yield positive results.

Population health recognizes that the health and well-being of individuals and of populations is determined by a complex interaction between factors in the social and physical environments, by the lifestyle choices that individuals make, and by biological and genetic factors that are unique to the individual. Health services influence individuals' health, but other factors also play significant roles. The quality of the water we drink and the air we breathe, whether we smoke or not, the type of social supports we have, the safety of our neighbourhoods all play a powerful role in determining the health of individuals and the well-being of the population as a whole.

With population health, the emphasis is on changing the social and physical environments in order to promote well-being for all and to make it easier for individuals to make healthy choices for themselves. Population health emphasizes prevention and creating strong communities so that problems do not occur.

A strength-based approach recognizes that all communities have strengths and assets that can be mobilized to improve the quality of life for all citizens. Commitment, involvement and participation by community members are key to building a sense of ownership over community well-being.

Several other community groups joined the Building Caring Communities partnership and funding was provided by Health Canada. The partners provided in-kind contributions such as the time of their staff members, travel costs for their staff members, office space, etc. During the summer of 2000, the Building Caring Communities concept was further developed through discussions among the partners and with health promotion experts across Saskatchewan.

Late in 2000, a part-time contract facilitator was hired. The facilitator's job included working with the Steering Committee and with communities. She prepared meeting summaries, did research and developed this workbook.

Building Caring Communities was piloted in Sturgis, Saskatchewan. The experiences and learnings from that pilot helped show what works and what doesn't work and provided a practical foundation for the ideas in this workbook.

Introduction

This section addresses three topics:

- What is Building Caring Communities?
- Purpose of This Workbook
- Organization of This Workbook

What is Building Caring Communities?

Building Caring Communities is a process that communities can use to become stronger and to improve the well-being of all citizens. It identifies the things that make communities and individuals strong and encourages communities to focus on factors that promote health and well-being.

How Will Communities Benefit?

Building Caring Communities has the potential to:

- Improve the physical and psychological well-being of individuals and of the community as a whole

- Create a caring community with stronger connections among its members, a greater sense of belonging for citizens and a more supportive environment

- Give communities and individuals a sense of control over some of the factors that affect health and well-being.

- Enhance community leadership skills because the process gives people experience leading meetings, involving community, speaking in public and similar skills that benefit individuals and the community as a whole.

- Reduce costs because fewer people will be unhealthy.

Building Caring Communities is about keeping people healthy and connected to each other. It's about creating a strong community so problems don't develop.

What Are the Basic Principles of Building Caring Communities?

Four basic principles underlie Building Caring Communities. These principles are:

- **Prevention** – Promoting health and well-being and preventing problems leads to stronger communities and better quality of life for individuals.

- **Determinants of health** – Our health and well-being are affected by many factors in the physical and social environment. Some of these factors are things that communities can influence. Our health and well-being are also affected by factors that are unique to us as individuals.

- **A strength-based approach** – It is more productive to recognize and build upon the strengths of a community than to focus on deficits.

- **A community-based approach** – A community-based approach means that all citizens are part of the process. It means that the community as a whole and that citizens, individually and collectively, have ownership for strengthening their community and for decision-making.

Why is Prevention Important?

Building Caring Communities is a new way of looking at communities. The traditional way of looking at communities is to do a needs assessment, to identify all of a community's problems, deficits and weaknesses, to list things that need to be fixed, and to focus on solving problems.

Building Caring Communities takes the opposite approach. It identifies the things that make communities and individuals strong and encourages communities to emphasize factors that promote health and well-being. It takes a preventative approach and focuses on ensuring that problems do not occur. Preventing problems makes life better for communities and for the individuals who live in those communities.

What Are the Determinants of Health?

The availability and quality of health care influence your health, but so do many other factors.

Influences on people's health include:

- the social and economic environment;
- the physical environment; and,
- each person's individual characteristics and behaviours.

These factors are called the **determinants of health**.

The determinants of health do not exist in isolation from one another. Rather, they work together in a complex system. What is clear though, is that people's circumstances affect their health and well-being. For example, research shows that living and working conditions have a greater impact on people's health than health care. Things like housing, income, social support, work stress and education also make a big difference in how long people live, and the quality of their lives (Canadian Health Network).

Why the Focus on Community Strengths?

Every community and every individual has strengths and assets.

Living a productive life as an individual and being a strong and caring community depends upon whether those strengths are used, developed and strengthened. Individuals and communities whose gifts are recognized and valued feel good about themselves, develop a positive view of themselves and keep on growing. The key to successful community building is to identify all the community's strengths and to link strengths together in ways that multiply their effectiveness.
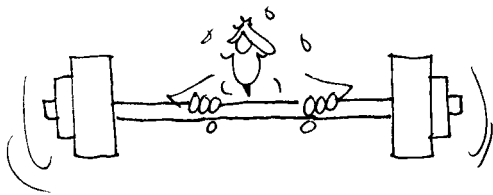
This approach to community building is quite different from the traditional approach that begins with a needs assessment and emphasizes a community's problems and deficits. Emphasizing problems can create a negative focus.

Emphasizing problems also tends to convince citizens that outside intervention is necessary if the community is to become a better place to live.

_____

Source: The information above on the determinants of health is a direct quote from: Canadian Health Network. (1999). *What Makes People Healthy?* (http://www.canadian-health-network.ca/faq-faq/determinants_of_health-determinants_.../le.htm)

A strength-based approach shows communities that they have resources and strengths to rely upon and that they don't need to depend on outside intervention.

A strength-based approach sees the glass as being half-full rather than half-empty.

What is a Community-Based Approach?

People are usually only committed to the decisions they make themselves, thus there is a strong emphasis on community involvement and community decision making in Building Caring Communities. The project describes a basic process for community action, but communities are encouraged to modify and adapt this process to suit their own situation.

What is the Building Caring Communities Process?

The Building Caring Communities process will vary from one community to the next. Usually the process will have seven stages:

1. **Create a planning group** – The planning group consists of a few key people who lead the process.

2. **Involve community members** – Get representatives of different community groups together to explore the idea of Building Caring Communities.

3. **Learn more about your community** – Identifying the community's strengths is important at this stage.

4. **Decide on community action** – This stage involves selecting determinants of health and related activities.

5. **Plan specific activities** – Planning to accomplish specific activities involves deciding who will do what, when, obtaining resources and deciding how you will measure success.

6. **Implement specific activities** – It may be necessary to modify plans as implementation progresses.

7. **Reflect on your work** – This includes evaluating the effectiveness of the activities you have chosen.

Purpose of This Workbook

This workbook is intended to be a practical guide to the Building Caring Communities process. It describes the process, tells how it was implemented in one community, and includes educational materials and forms for duplication.

Organization of This Workbook

This workbook is divided into four parts.

Part 1: **What is Building Caring Communities?** – provides information about the basic principles which underlie this approach to health and well-being and about its advantages.

Part 2: **The Building Caring Communities Process** – gives an overview of the process and then describes each of the seven steps in detail.

Part 3: **For More Information** – lists websites, books and other information sources that may be useful.

Part 4: **Tool Kit** – provides educational materials and forms that communities can photocopy and use.
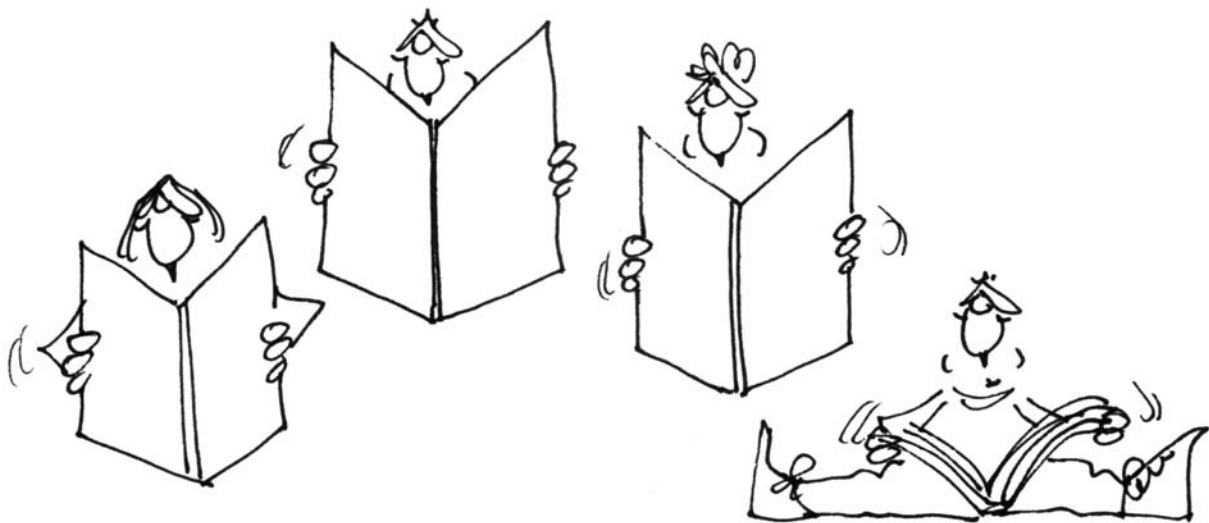
Part 1: What is Building Caring Communities?
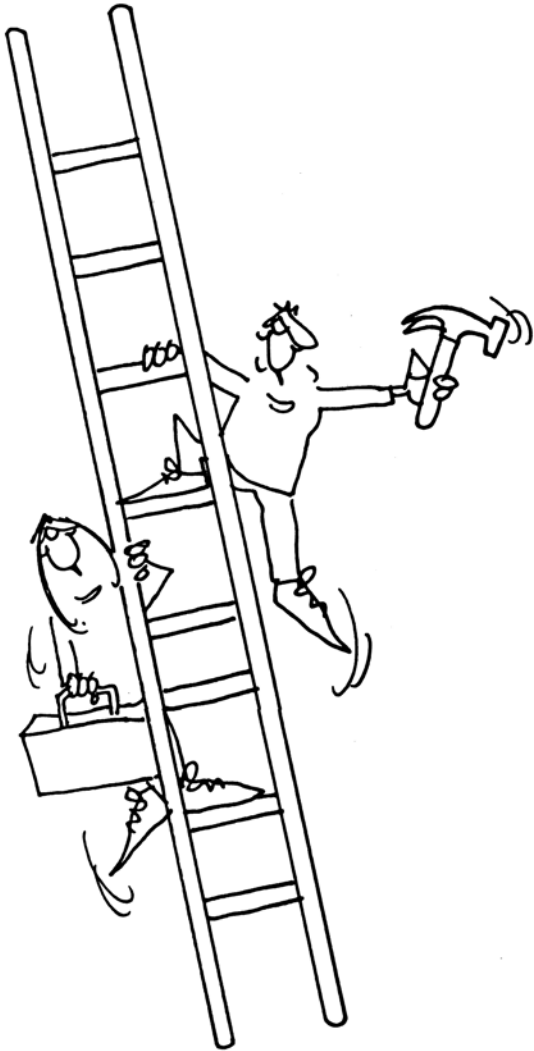
Part 1: What is Building Caring Communities? includes the following sections:

- Building Caring Communities – Basic Principles

- Advantages of Building Caring Communities

Building Caring Communities – Basic Principles

Four basic principles underlie Building Caring Communities. These principles are:

- **Prevention** – Promoting health and well-being and preventing problems from arising leads to stronger communities and greater well-being for individuals.

- **Determinants of health** – Our health and well-being are affected by many factors in the physical and social environment. Some of the factors that affect health and well-being are things that communities can influence. Our health and well-being are also affected by factors that are unique to us as individuals.

> **Building Caring Communities Basic Principles**
>
> - *Prevention*
> - *Determinants of health*
> - *A strength-based approach*
> - *A community-based approach*

- **A strength-based approach** – It is more productive to recognize and build upon the strengths of a community than to focus on deficits.

- **A community-based approach** – A community-based approach means that all citizens are part of the process. It means that the community as a whole and that citizens individually and collectively have ownership for health, well-being and decision-making

More information about each of these principles is provided in the sections that follow.

Prevention

Building Caring Communities is a new way of looking at communities. The traditional way of looking at communities is to do a needs assessment; to identify all of a community's problems, deficits and weaknesses; to list things that need to be fixed; and then to focus on solving problems.

Building Caring Communities takes the opposite approach. It identifies the things that make communities and individuals healthy and strong and encourages communities to emphasize factors that promote health and well-being. It takes a preventative approach and focuses on ensuring that problems do not occur. Building Caring Communities is comprehensive, considering all aspects of physical, psychological and emotional well-being.

Prevention

Building Caring Communities takes a preventive approach and focuses on ensuring that problems do not occur. It emphasizes factors that promote health and well-being.
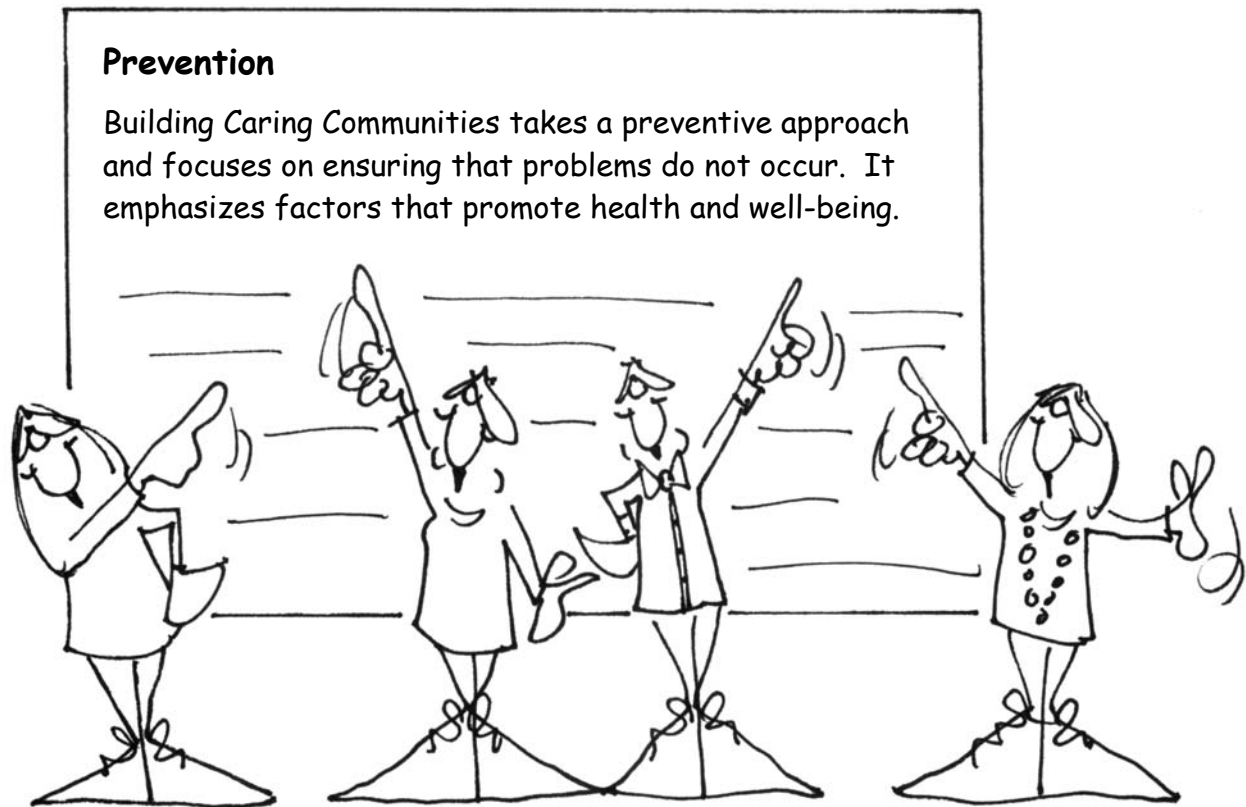
The Determinants of Health

Our physical, emotional and psychological well-being are influenced by many factors in the physical and social world. Your well-being is influenced by the water you drink, the food you eat, the air you breath, the level of violence in your community and by the quality of your friendships, as well as by the availability and quality of health services. Those factors that influence well-being and health are called the determinants of health.

The determinants of health do not act independently from one another. They work together in a complex system. It is the combined influence of several of these determinants that affect health, quality of life and length of life. Many of the determinants of health are things that communities can influence. By taking action on the determinants of health, communities can improve the well-being of individuals and the community as a whole, and prevent problems from developing.

Some of the determinants of health relate to the social world and some to the physical world. Others are factors that are unique to us as individuals. The determinants of health are described in the chart on the next three pages.
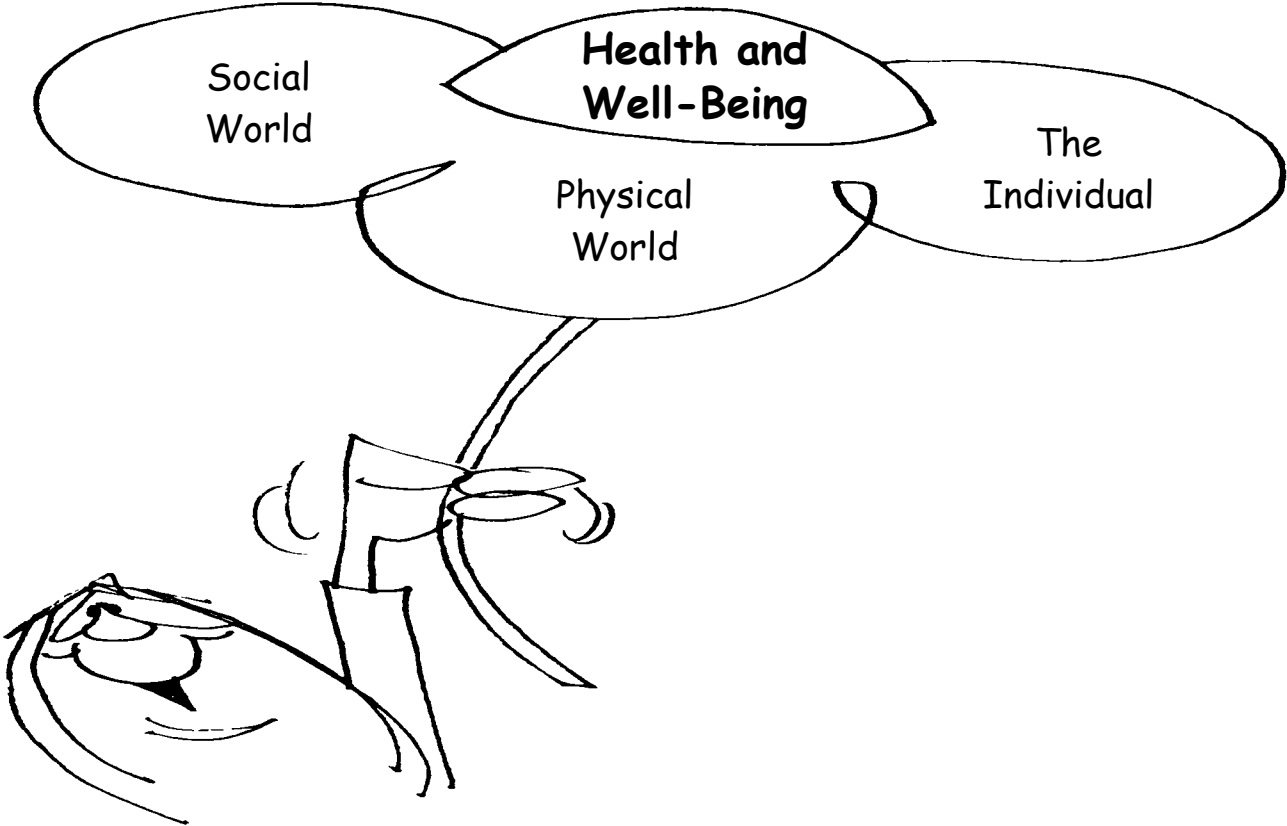
Determinants of Health

Figure 1: The Determinants of Health

Social World	
Income and Social Status	**Income and social status may be the most important determinants of health.**
	Health status improves at each step up the income and social hierarchy. The healthiest populations are those in societies that are prosperous and have an equitable distribution of wealth. Two examples of the link between income and social status and well-being are:
	1. Adequate income determines living conditions such as safe housing and the ability to buy enough good food.
	2. Higher income usually means more control over life circumstances. Generally, the more control people have over their life circumstances, the healthier they are.
Social Support Networks	**Support from families, friends and communities is associated with better health.** Social support networks are important in helping people solve problems and deal with adversity, as well as in maintaining a sense of control over life circumstances. For example, people with support from friends and family have others to talk over problems with, to share satisfactions with, and to rely upon when the going gets rough.
	The caring and respect that occurs in social relationships, and the resulting sense of satisfaction and well-being, seem to act as a buffer against health problems. For example, people with broad social relationships have companionship for meals, social events and everyday activities.
Education	**Education is closely tied to socioeconomic status.** Effective education for children and lifelong learning for adults are key contributors to health and prosperity for individuals, and for the country.
	For example, education contributes to health and prosperity by equipping people with knowledge and skills for problem solving, and helps provide a sense of control over life circumstances. It increases opportunities for job and income security, and job satisfaction. It also improves people's ability to access and understand information to help keep them healthy.
Employment and Working Conditions	**People who work in safe environments, enjoy their work and have control over their work circumstances tend to have better health.** Unemployment, underemployment, stressful or unsafe work are associated with poorer health. People who have more control over their work circumstances and fewer stress-related demands of the job are healthier and often live longer than those in more stressful or riskier work activities.
	For example, secretarial work is usually considered stressful, because many secretaries have little control over the flow and pace of their work, because they are constantly interrupted by the people they work for, and because they often work in a noisy, busy open area.

Social World (Continued)	
Social Environments	**The importance of social support also extends to the broader community.** Civic vitality refers to the strength of social networks within a community, region, province or country. It is reflected in the institutions, organizations and informal giving practices that people create to share resources and build attachments with others.
	Examples of community networks that help build attachments to others are programs that link youth and seniors, or increase integration of school and community. Networks that promote sharing of resources include clothing exchanges, community kitchens and community gardens.
Healthy Child Development	**Good prenatal care and good physical and psychological nurturing in the first few years of life lay a foundation for a lifetime of good health.** New evidence about the effects of early experiences on brain development, school readiness and health in later life show that early child development is a powerful determinant of health in its own right.
	At the same time, all the other determinants of health affect the physical, social, mental, emotional and spiritual development of children. For example, a young person's development is greatly affected by his or her housing and neighbourhood, family income, level of parents' education, access to nutritious foods and physical activity, genetic makeup, and access to dental and medical care.
Health Services	**Both the quality of health services and individuals' access to those services are important.** For example, it is important that hospitals have modern equipment and well-qualified staff. It is also important that people have transportation so they can get to the hospital when necessary.
	Health services include those designed to maintain and promote health as well as those intended to fix disease and disability. For example, health services include programs to reduce obesity and inactivity and thus reduce the incidence of diabetes, as well as programs to remedy diabetes after it develops.
Physical World	
Physical Environments	Our physical environment includes:
	• **The quality of the air we breath and the water we drink** – Contaminants in the air, water and soil can cause asthma, allergies, birth defects, stomach problems, and, sometimes, even death.
	• **The neighbourhoods we live in** – Neighbourhoods that are attractive and free of safety hazards and violence promote well-being.
	• **Transportation** – Adequate transportation enables people to get around so they can participate in education, recreation and community activity.
	• **Housing** – The quality of housing available to all citizens is an important determinant of health. Quality housing is clean, safe and adequate in size for the number of residents.

Figure 1: The Determinants of Health (Continued)

The Individual	
Personal Health Practices and Coping Skills	**There are many actions that individuals can take to prevent disease**, promote self-care, cope with challenges, develop self-reliance, solve problems and make choices that enhance health. For example, eating lots of fruits and vegetables, exercising regularly and not smoking are personal health practices that promote health. However, personal life "choices" are greatly influenced by the socioeconomic environments in which people live, learn, work and play. For example, in some northern and remote communities, fresh fruit and vegetables are costly or unavailable and eating a healthy diet becomes difficult. When everyone in a youth's immediate family smokes, the youth tends to see smoking as the norm. When individuals feel their communities are safe, they are more likely to walk in the evening and play family games in the park. People who have strong coping skills tend to have better health. Coping skills include the ability to manage life's ups and downs, to solve problems and to get along with others, including the ability to resolve conflict.
Biology and Genetic Endowment	**The basic biology and organic make-up of the human body are a fundamental determinant of health.** Some people are genetically predisposed to certain health problems. However, a positive environment and good personal health practices can sometimes offset a predisposition to specific health problems. For example, certain types of cancers seem to run in some families, but avoiding environmental pollutants and smoking can help offset this predisposition, and regular screening can catch problems early.
Gender	**Society tends to treat men and women differently** and to have different expectations for them. For example, they tend to work at different jobs and have different income levels – factors which relate to physical and mental health. Men and women often get different diseases and conditions. Sometimes these health differences are directly due to gender. For example, men can get prostrate cancer and women can experience complications of childbirth. However, many of the health differences between men and women occur because society treats the genders differently. As well, the health care system sometimes treats women and men differently.
Culture	**Marginalized cultural groups tend to have poorer health than the population in general**. This is largely due to the lower incomes, poorer living conditions and lower levels of education experienced by some cultural groups. As well, some cultural groups have a predisposition to certain diseases and conditions.

Source: Determinants of health adapted from:

Health Canada (2001). *Population Health Approach*.
(http://www.hc-sc.gc.ca/hppb/phdd/determinants/index.html)

Canadian Health Network. (1999). *What Makes People Healthy?*
(http://www.canadian-health-network.ca/faq-faq/determinants_of_health-determinants_.../le.htm)

A Strength-Based Approach

All communities have strengths they can apply to the process of building a caring community. One of the key elements of Building Caring Communities is recognizing the strengths of specific communities and building on those strengths to create even greater strength. Community strengths can be grouped into two categories.

- Strengths Relating to Community Structure

- Strengths Relating to the Determinants of Health

The two types of strengths are discussed below.

Strengths Relating to Community Structure

- **Strengths in people** – For example, your community may have seniors with time and energy to give, or youth with lots of enthusiasm. When a community has strengths in people, there are individuals and groups who are willing to work with their neighbours to plan and implement programs.

- **Strengths in the way people work together** – Some communities have a history of working together to get things done. In other communities, there might be a strong relationship between the town and the surrounding rural area, or the farmers in the community might be well organized to speak about issues that concern them. Communities with strength in the way people work together can base new activities on the relationships that are already established and expand those relationships to include more individuals and groups.

> **Strengths Relating to Community Structure**
>
> - Strengths in people
> - Strengths in the way people work together
> - Strengths in community facilities
> - Strengths in community services

- **Strengths in community facilities** – Some communities have facilities that can provide locations for community programs and activities. Examples include curling and skating rinks, a big school gym, a lovely park. All of these facilities can be used for recreation and activity programs.

  Facilities that are presently underutilized can represent a strength. For example, a school that has been partly or fully closed, extra space at a town/city hall, or a business that is closed, all represent space that can be used for other purposes. Underutilized spaces can be used for community education or recreation programs.

- **Strengths in community services** – Community services can include businesses that contribute to the community, service clubs or government services, for example:

  - a newspaper, radio or TV station that does a good job of reporting community activities, a grocery store, that, in return for advertising, will donate food to children's programs,

  - service clubs and churches that take a strong role in community life, by promoting programs and contributing time and energy to community activities,

  - a Chamber of Commerce that organizes events to bring people together and promote the business community like farmers' markets, sidewalk sales, street concerts or sidewalk entertainers,

  - government/public services like schools or regional colleges that try to create stronger links between education and community, for example, schools that frequently take students into the community for field trips and invite community members into the school, and/or

  - government departments that facilitate community life, for example, through grant programs for community recreation, wellness or safety programs.

Strengths Relating to the Determinants of Health

Communities can have strengths in relation to the determinants of health too. Figure 2 that appears on the next two pages gives a few examples of the ways that communities might have strengths relating to the determinants of health.

Figure 2: Examples of Community Strengths Relating to the Determinants of Health

Social World	
Income and Social Status	• Equitable distribution of wealth – most people have enough to live modestly – few rich or poor people • Low unemployment rate
Social Support Networks	• Active seniors' group • Strong farmers' rally group • Transportation to get people to family and community events
Education	• High retention rate in K-12 school • Upgrading programs for adults who want to finish Grade 12 • Family literacy programs • Seniors' computer literacy program
Employment and Working Conditions	• Majority of workplaces are smoke free • Use of hard hats and steel-toed boots is strictly enforced on construction sites
Social Environments	• Community gardens • Active volunteer bureau
Healthy Child Development	• Low rate of fetal alcohol syndrome (FAS) • Transportation to immunization and well-baby clinics for low-income moms
Health Services	• Programs that promote health, like breast cancer screening programs
Physical World	
Physical Environments	• Clean air • Clean (lab-tested) water supply • Low rate of vandalism, property offences and violent crimes • Flower pots and baskets throughout the business area • Playgrounds that are free of broken glass and other hazards

The Individual	

Personal Health Practices and Coping Skills	• Changes in the environment that make it easier for individuals to make healthy choices. For example:
	  ▪ Smoke-free workplaces and public facilities
	  ▪ Healthy food choices in public facilities and access to inexpensive fruits and vegetables

Biology and Genetic Endowment	• Screening programs for medical conditions that run in families
Gender	• Programs that teach health care providers about the differences between heart attack symptoms in women and men
Culture	• Programs located in neighbourhoods where marginalized cultural groups live • Programs that teach people how to prevent conditions that are common among specific cultural groups, like diabetes and osteoporosis

A Community-Based Approach

This *Building Caring Communities Workbook* describes the Caring Communities concept and outlines a general process that communities can follow, but it does not tell communities what activities they should undertake.

Building Caring Communities takes a community-based approach. Responsibility for decision-making and action rests with the community. Communities can modify, adapt or change the process outlined in this workbook to suit their own needs. They can identify their own strengths and decide upon the specific activities that are right for them.

People are usually only committed to the decisions they make themselves – thus there is a strong emphasis on community involvement and community decision making in Building Caring Communities.

Advantages of Building Caring Communities

Building Caring Communities identifies the factors that contribute to community and individual health and encourages communities to focus on the factors that promote health and well-being for all.
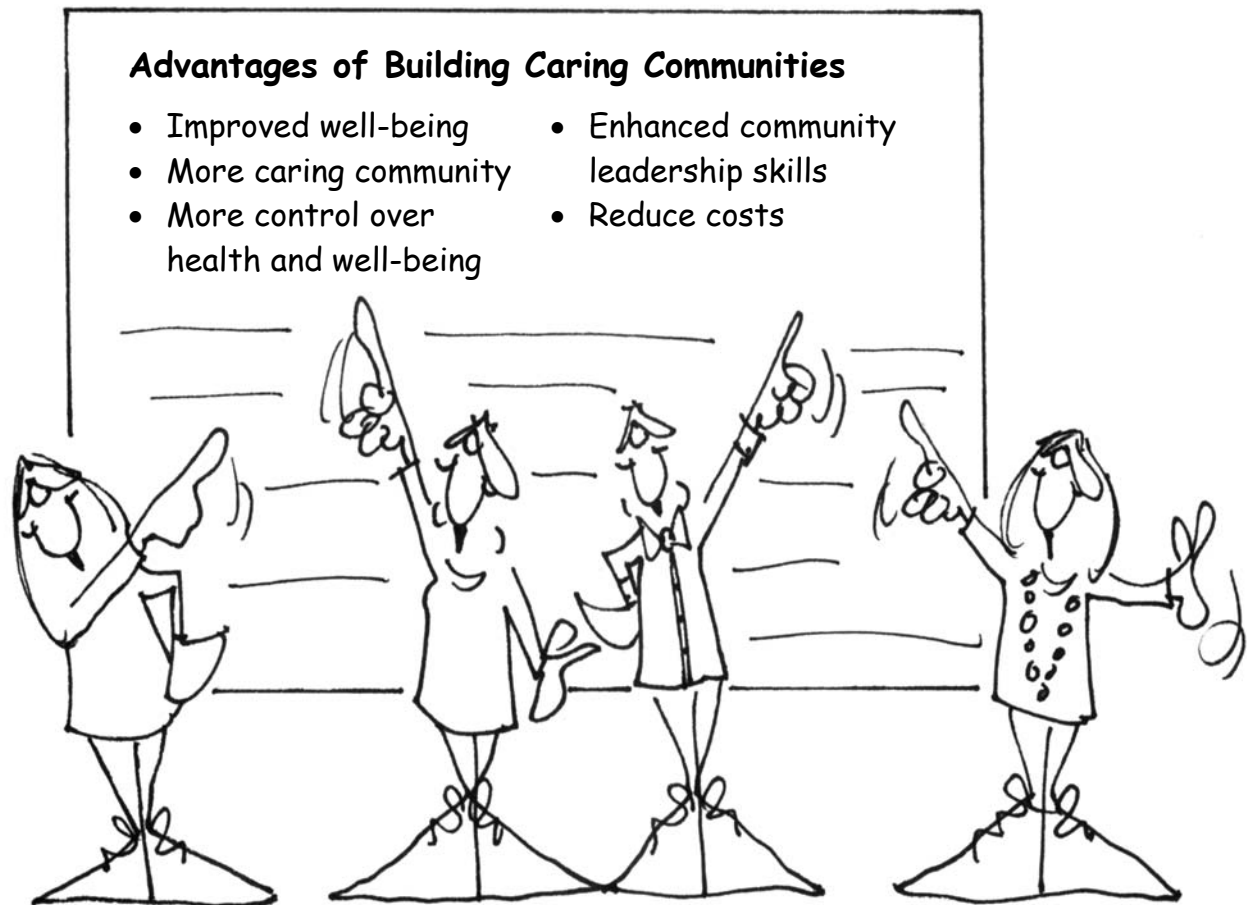
Advantages of Building Caring Communities

- Improved well-being
- More caring community
- More control over health and well-being
- Enhanced community leadership skills
- Reduce costs

Building Caring Communities has the potential to:

- Improve the physical and psychological well-being of individuals and of the population as a whole.

- Create a caring community with stronger connections between its members, a greater sense of belonging and responsibility for citizens, and a more supportive environment.

- Give communities and individuals a sense of control over some of the factors that affect health and well-being.

- Enhance community leadership skills – The Building Caring Communities process gives community members experience in leading meetings, involving community, speaking in public and writing information materials. Growth in these skills benefit individuals and the community as a whole.

- Reduce costs because fewer people will be unhealthy.

Part 2: The Building Caring Communities Process
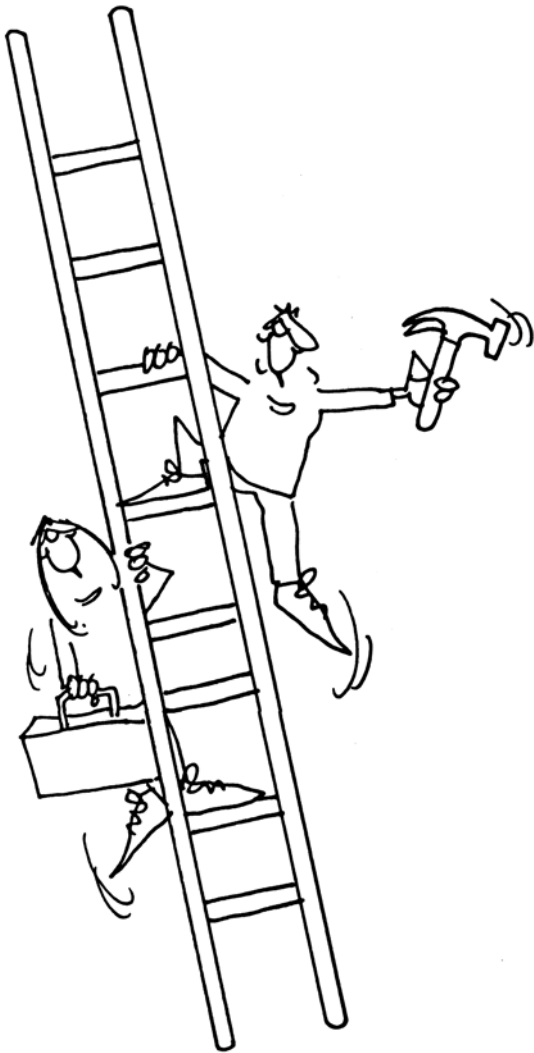
Part 2: The Building Caring Communities Process includes the following sections:

- An Overview of the Building Caring Communities Process

- Step 1 – Create a Planning Group

- Step 2 – Involve Community

- Step 3 – Learn More About Your Community

- Step 4 – Decide on Community Action

- Step 5 – Plan Specific Activities

- Step 6 – Implement Specific Activities

- Step 7 – Reflect on Your Work

An Overview of the Building Caring Communities Process

This section addresses three topics:

- The Process in Summary
- Who Does What?
- How Do We Decide?

The Process in Summary

The seven steps in the Building Caring Communities process are described below. The steps are listed in a linear manner for simplicity and convenience. In fact, they aren't nearly as linear as they appear below. There may be considerable overlap between them and sometimes it may be necessary to go back and forth among them. For example, there is usually a lot of overlap between planning (Step 5) and implementation (Step 6). Even as you are implementing early stages of a project you may still be planning what is to come.

Building Caring Communities Process

1. Create a planning group
2. Involve community
3. Learn more about your community
4. Decide on community action
5. Plan specific activities
6. Implement specific activities
7. Reflect on your work

Step 1: Create a Planning Group

The Building Caring Communities process usually begins when a few key people get together to form a planning group and discuss the potential for the process in their community.

Step 2: Involve Community

If the planning group thinks that the Building Caring Communities process has potential for their community, the next step is to involve the broader community. This can be done through a large, formal, public meeting, or through a series of public meetings. It can also be done through informal conversations with service clubs, seniors' groups, First Nations organizations, church organizations, community groups, school students and others. Different approaches will be suitable for different communities.

Regardless of the approach you take to involve community, it is important to emphasize that Building Caring Communities is about building on a community's strengths, about making communities stronger in order to improve citizens' well-being and quality of life. Building Caring Communities is about prevention – about creating an environment where problems are less likely to occur. Building Caring Communities isn't about identifying and fixing problems.

This will be a new approach for some people who are used to a problem-based perspective.

Step 3: Learn More About Your Community

Every community has strengths and assets. Identifying those strengths and linking them together to multiply their effectiveness is the key to community building. Thus, the most important task during this step is to identify your community's strengths.

You might also want to collect information about other aspects of the community. For example, you might want to get information about the number of people of various ages, so that you can target activities to specific age groups. Or you might want to get examples of programs that have worked well in the past, so that you can use processes with a proven record of success.

Step 4: Decide on Community Action

Deciding on a focus for action involves identifying one or more determinants of health and selecting specific activities. Some communities will identify the determinants first and then select activities that reflect these determinants. Other communities will identify specific activities that will enhance their communities and then see which determinants of health those activities relate to.

Step 5: Plan Specific Activities

Planning to implement specific activities usually involves the following tasks:

- Make a work plan based on community strengths for each activity.

- Obtain the resources you need. Resources often include facilities, equipment and labour. Some activities may require money, but many activities can be accomplished with little or no cash, simply by drawing on existing resources.

- Decide how you will evaluate each activity and plan to collect evaluation data.

Step 6: Implement Specific Activities

This is the stage where you put your plans into action. Sometimes things won't go exactly as planned and it may be necessary to go back to Step 5 and change your work plan, adjust your timeline or organize different activities.

Step 7: Reflect on Your Work

Reflecting on your work can include three components:

- Use evaluation data to assess whether the objectives of each individual activity and the project as a whole have been met.

- Identify the learnings from Building Caring Communities that might be applied to other projects in the future.

- Tell others about your work – others can learn from what you did and from your successes and challenges.

Who Does What?

Implementing a Building Caring Communities process involves some work at each stage of the process. The amount of work will depend on the type and nature of the community and on the specific activities selected. It is important to:

- Clearly define the tasks that are to be done.

- Establish timelines for the various tasks.

- Assign responsibility, so people know what is expected of them and so things get done.

The sections below discuss who does what at each step of the Building Caring Communities process.

Step 1 – First Planning Meeting

Usually the Building Caring Communities process begins when one or two people in the community are enthusiastic about the idea. They recognize that Building Caring Communities can make their community stronger. These enthusiasts identify other key people and invite them to a planning meeting. The enthusiasts also make practical arrangements for the planning meeting like:

- Make arrangements for a meeting room and coffee.
- Make copies of *Building Caring Communities—An Overview* (This handout brochure is provided in the Tool Kit at the end of this workbook.)
- Organize the Building Caring Communities audiovisual presentation (This presentation is provided in the Tool Kit.). Organizing the audiovisual presentation can include making overheads or a PowerPoint disk, getting an overhead or PowerPoint projector, and delivering the presentation.

Step 2 – Community Involvement

Members of the planning group will probably assume responsibility for additional community involvement. They will decide what form this involvement should take, for example, whether a large community meeting or small meetings with organizations and groups is most appropriate for their community. The planning group will also probably assume responsibility for making the contacts necessary to involve a broader cross-section of the community. Consultation with the broader community will indicate whether the *Building Caring Communities* process has potential in a community and whether it is appropriate to proceed with Steps 3 to 7.

Steps 3 to 7 – Action

After a community decides to go ahead with a Building Caring Communities process, there are three types of work that need to be done:

- **Facilitation** – making presentations, talking to people, inviting people to meetings, asking people if they think this process will benefit their community, leading groups, doing media interviews,

- **Writing and research** – writing media releases and letters, collecting data about the community, researching Statistics Canada data, writing newsletter articles, and

- **Administrative work** – like typing and photocopying handouts and posters, and arranging for meeting rooms.

There are several ways this work can be accomplished.

- **Volunteers** – Individual members of the community may be willing to volunteer for some tasks as a community contribution or as a way of learning new skills. In addition, community organizations such as a service club, seniors' group or teen group may be willing to participate in Building Caring Communities, as a group contribution.

- **In-kind contributions** – Local agencies like the health district, a First Nation, the town or city, or a government department may be willing to contribute the time and energy of one or more of their employees. Sometimes local businesses or individuals will be willing to provide in-kind contributions, such as building supplies, food, postage, or the time of one of their staff members. Business will be more inclined to donate if they receive recognition for their contributions, for example, if the business name and logo appears on program materials as a sponsor. Under some circumstances, charitable organizations that are registered with the Canada Customs and Revenue Agency and certain other organizations can provide a tax receipt to businesses that give in-kind contributions. If your Building Caring Communities partners include organizations that are eligible to give tax receipts, you may, in specific situations, be able to give tax receipts to businesses or individuals that provide in-kind contributions. Check with the Canada Customs and Revenue Agency for a ruling on your specific situation.

- **A contracted facilitator** – This would be a part-time or contract position, not a full-time job. If you contract a facilitator, look for someone who is:

  - well organized,
  - has good writing skills,
  - is confident speaking in front of groups and
 - is willing to assume a facilitative role rather than a decision-making role.

  For ideas about paying for a contacted facilitator, refer to Step 5 of this workbook. Step 5 provides information about funding sources.

How Do We Decide?

Every decision has two components: the process used to make decisions and the individuals or groups responsible for the decision. These aspects of decision-making are described below.

Decision-Making Processes

The two most common ways of
making decisions are majority vote
and consensus. Reaching consensus
usually involves some compromise
and negotiation so that the final
decision is one that everyone can live
with and support.
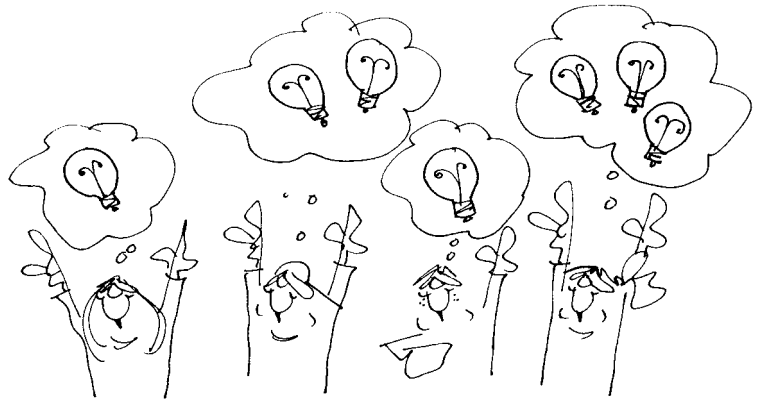
The success of Building Caring Communities depends, in part, on the enthusiasm and
commitment of individuals and the organizations they represent. Therefore, individuals
and groups who speak in favour of a particular course of action should be willing to back
up their position by contributing time, energy or resources. Verbal support without an
accompanying commitment to help with the work, usually isn't enough to create a
successful project.

Who Decides?

Step 1 – First Planning Meeting – The individuals participating in this meeting will
decide whether there is potential to proceed to the next step.

Step 2 – Community Involvement – Community involvement may take several
different forms ranging from big public meetings to consultation with small community
groups and organizations. One of the most important topics at these meetings will be
whether the Building Caring Communities process has potential for your community. By
the time community consultations are finished, it is likely that a consensus will have
emerged on whether there is community support for Building Caring Communities.

Steps 3 to 7 – Action – Probably the planning group
will meet regularly to provide stability throughout the
Building Caring Communities process. In addition, it
may be appropriate to set up structures to get
community input into major decisions. Some ideas for
doing this include:

- Hold a Building Caring Communities community
  meeting every month and invite the general public.

- Ask members of the planning group who represent
  community organizations to consult with the
  organizations they represent.

- Set up subcommittees to deal with specific aspects
  of the Building Caring Communities process.

Building Caring Communities
in Action
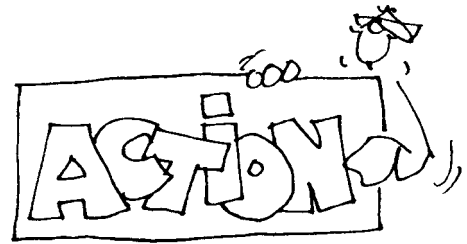
Pilot Project

Sturgis, Saskatchewan

The Building Caring Communities process was piloted in Sturgis, Saskatchewan.

Sturgis is located in east central Saskatchewan on Highways #9 and #49. Yorkton, which is about 100 kilometres away, is the nearest city.

About 700 people live in Sturgis and another 3,000 in the trading area around it. There is a large population of seniors in the town, many of them retired farmers who have moved to town.

Visitors to Sturgis notice right away how attractive the town is. Sturgis participates in the *Communities in Bloom* program and, in summer, planters and baskets of colourful flowers appear throughout the business area and on the highway through town. Most homeowners have beautifully maintained lawns and gardens with an abundance of flowers.

A riverside park with many large trees is another feature of the community. It offers natural beauty and serenity for picnickers, campers, and for anyone who wants a moment of tranquility.

Other interesting facts about Sturgis include:

- Sturgis is home to Saskatchewan's largest one-day rodeo and sports day. A statue of a bucking horse and rider commemorates the rodeo.

- Sturgis has five churches, all with active congregations and well maintained buildings.

.. TOWN OF STURGIS ..
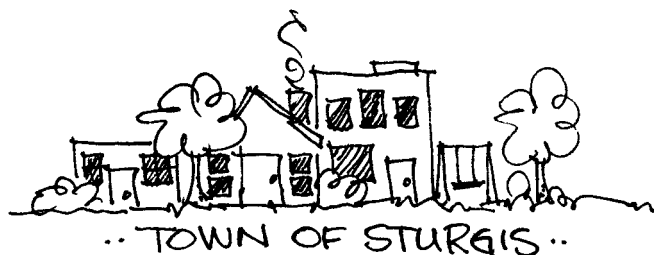
Step 1 – Create a Planning Group

This section addresses two topics:

- Forming the Planning Group
- The First Meeting

Forming the Planning Group

A Building Caring Communities project usually begins when a small planning group gets together to explore the Building Caring Communities Concept and to determine whether this concept has potential for their community.

This planning group usually consists of six to eight key people in the community. It might include:

Building Caring Communities Process

1. **Create a planning group**

2. Involve community

3. Learn more about your community

4. Decide on community action

5. Plan specific activities

6. Implement specific activities

7. Reflect on your work

- the mayor/reeve/chief of the town/village/rural municipality/First Nation

- representatives of the health district

- representatives of First Nations/Métis Nation

- representatives of local schools, school division, regional college

- representative of the ministerial association

- representatives of the board of trade or Chamber of Commerce

- representatives of local organizations like seniors' groups, teen groups, service clubs, church groups, etc.

- representatives from surrounding rural area or members of farmers' groups.

The First Meeting

At its first meeting the planning group can:

- Learn More About the Building Caring Communities Concept
- Discuss the Potential of the Building Caring Communities Process
- Decide If They Wish to Proceed to the Next Step

Each of these processes is described below.

Learn More About the Building Caring Communities Concept

Building Caring Communities recognizes that by focusing on the factors that promote health and well-being, communities can become stronger and prevent problems from arising.

Information about the Building Caring Communities concept is provided in the handout and audiovisual presentation provided in the Tool Kit at the end of this workbook:

- Give a copy of the handout to each person at the planning meeting.
- Ask one member of the group to deliver the audiovisual presentation.

Discuss the Potential of the Building Caring Communities Process

A discussion about the potential of the Building Caring Communities process might address questions such as:

- How might our community benefit from Building Caring Communities?

- What are the pros and cons of Building Caring Communities for our community?

- Do the members of this planning group have enough time and energy to steer the process through to completion?

- Would the organizations we represent support the Building Caring Communities process?

- Does the community as a whole have enough energy and enthusiasm to follow through with the process?

Benefits of Building Caring Communities

Some examples are:

- *If we keep youth occupied with sports and recreation, then, vandalism may not occur.*

- *If we encourage pregnant women not to drink, then, our community may be free of fetal alcohol syndrome (FAS).*

- *If more people exercise, then, we may have less diabetes and heart disease in our community.*

- *If we increase adults' literacy levels, then, some of our citizens may be more employable and have higher self-esteem.*

- *If we regularly inspect our water supply, then, we may always have safe, clean water.*

- *If we clean up broken glass, then, fewer children may get cut.*

- *If we can promote visiting among seniors, then, their quality of life may improve.*

Benefits

Decide If They Want to Proceed to the Next Step

Step 2 in Building Caring Communities is involving the wider community.

The planning group cannot make a final decision about whether to proceed with Building Caring Communities since they are only a small group. However, they can assess whether it is appropriate to involve the broader community.

- If you decide that the Building Caring Communities process may have potential for your community, proceed to Step 2 of this workbook.

- If you decide that the process doesn't have potential at this time, keep the process in the back of your mind for the future. It may have potential in a few months or years, if circumstances change.
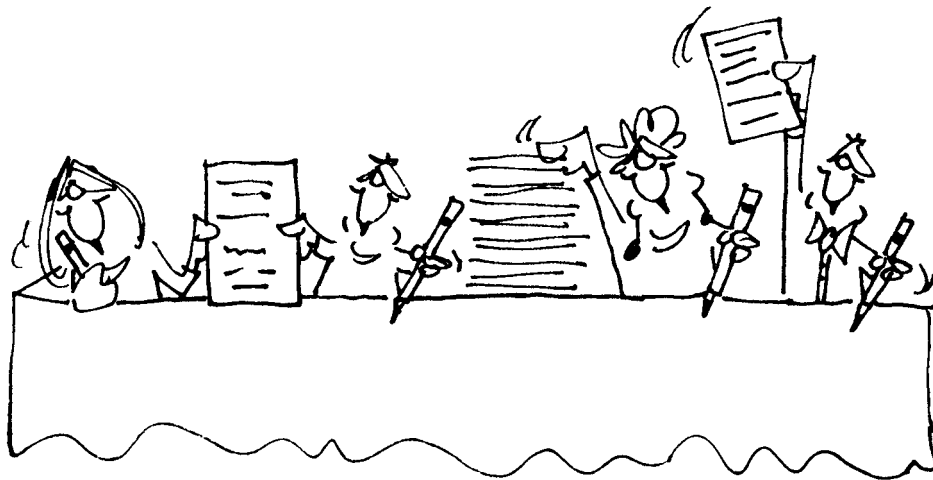
Building Caring Communities in Action
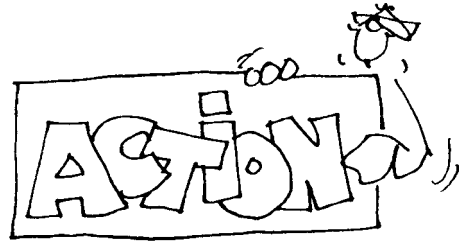
Sturgis – Creating a Planning Group

Sturgis' participation in Building Caring Communities began when Edna Parrott, Assiniboine Valley Health District representative on the Steering Committee, described the project to Craig Folk, Family Resource Centre Coordinator in Sturgis. The Steering Committee had asked Edna to contact Craig. They thought that Sturgis would be an ideal pilot site. It is a community that already has lots of things going for it, a strong community spirit and strong leadership.

Craig talked to Mayor Don Olson and several other leaders in the community who agreed that they would like to learn more about Building Caring Communities. Craig organized a meeting which was attended by about 20 community leaders, several members of the Steering Committee and the project facilitator. The project facilitator delivered an overhead presentation about Building Caring Communities (see the Tool Kit for a copy of this presentation) and the Steering Committee members responded to questions.

In retrospect, the Sturgis Planning Group says that this initial meeting was key to the success of the Building Caring Communities process in their community.
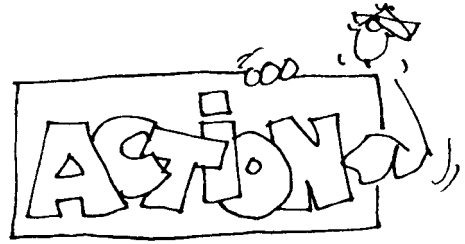
> *Craig Folk did a good job of handpicking people to participate in the first few meetings, he invited people who have a history of community involvement and a commitment to the community.*

A couple of weeks later the Sturgis people who had been at the initial meeting met again, without the project facilitator and Steering Committee, to discuss the project and how Sturgis might benefit from participation. Another meeting between Sturgis community leaders, the project facilitator and Steering Committee members followed. After these initial meetings, Sturgis community leaders decided that Building Caring Communities could benefit their town and volunteered to pilot the process.

The Sturgis Building Caring Communities Planning Group emerged out of these initial meetings. Comprised of a core of seven people who attended every meeting and another 10 or so who attended occasionally, this group steered the process through all its stages.

Building Caring Communities
in Action (Continued)

Sturgis – Creating a Planning Group (Continued)

Members of the Sturgis Planning Group report that:

At the beginning, the group didn't know what this project was all about. It was a project that encouraged the community to look at itself and to reflect upon the strengths of the community. What the project was all about only became clear about mid-way through. Community members had enough commitment to come to three or four meetings before they fully understood what they were doing. The community put extra effort into trying to understand the philosophy of the project.

Other communities that don't have the same sense of community commitment or the same history of working together may not understand the process of looking at and analyzing the community. They may not have the patience to work through a process of self-examination or the experience to select a project that will strengthen the community. Many communities are very focused on identifying a specific problem and then on developing a solution.

Step 2 – Involve Community
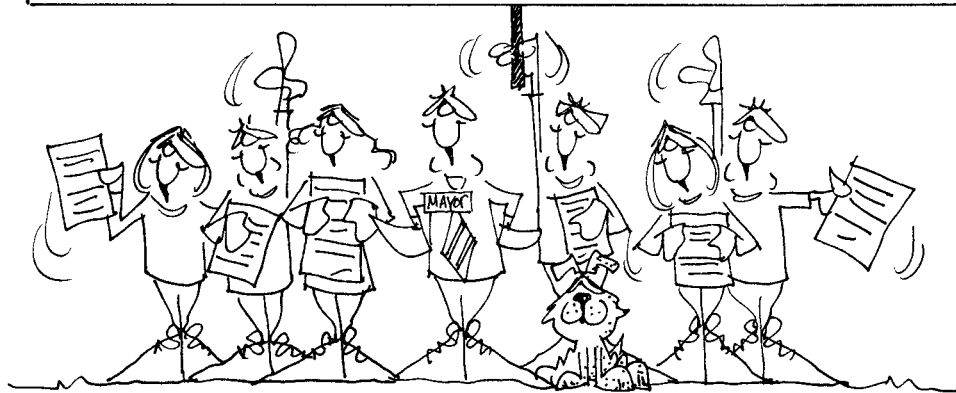
If the planning group feels that Building Caring Communities has potential for your community, the next step is to involve the broader community.

Methods of Involving Community

Three different ways of involving community are:

- Hold a large public meeting to which everyone in the community is invited.

- Hold an invitational meeting – Invite 15-20 individuals who represent a cross-section of ages and interest groups in your community. In addition, ensure that all significant community groups are represented. Community groups might include city/town/First Nation council, school, community college, First Nations organizations, service clubs, farmers' organization, seniors' groups, health district, etc.

- Meet with small groups. For example, you might meet with town council, the First Nation council, the high school SRC, the board of the health district, a service club, the ministerial association and similar groups.

Building Caring Communities Process

1. Create a planning group
2. **Involve community**
3. Learn more about your community
4. Decide on community action
5. Plan specific activities
6. Implement specific activities
7. Reflect on your work

You might decide to use one of these methods or all of them to involve the community and get their input. Different methods will be appropriate for different communities.

Community Meetings

Some Building Caring Communities planning groups will hold meetings to involve community. Remember:

- *Invite people in person – either by telephone or face-to-face, so that people get an opportunity to ask questions.*

- *For large public meetings, put announcements about the meeting in the local newspaper and on the local radio and TV station. Put up posters at the school, local offices, churches, and stores.*

- *Emphasize the date, time and location of the meeting in all invitations.*

- *When involving community, work through established agencies and organizations like community groups, First Nations, school division, health districts and government departments. These organizations already have communication networks and may be able to contribute in-kind resources.*

- *Don't limit yourself to established organizations. Make sure the wider community is aware of Building Caring Communities as well, so you reach people who aren't joiners and people who are self-employed.*

- *Involve local small business people in discussions about Building Caring Communities. They are an important part of the community and have a great deal to contribute.*
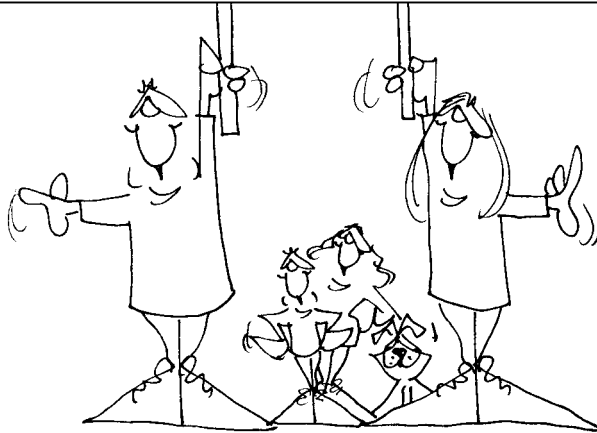
Regardless of the methods you use to involve the broader community, it is important to:

- Involve a Broad Cross-Section of Community Members
- Explain the Building Caring Communities Concept
- Describe the Benefits of Building Caring Communities
- Respond to Community Questions
- Ask If Building Caring Communities is Appropriate for Your Community

Each of these topics is discussed in more detail in the sections that follow.

Involve a Broad Cross-Section of Community Members

Regardless of which methods you use to involve community, it is important to get opinion from a broad cross-section of citizens. Try to involve:

- people from a wide variety of occupations,
- people of all ages,
- people of both genders,
- people of all income levels,
- people in the town/city, the surrounding rural area and nearby First Nations, and
- people who are often invisible, like stay-at-home parents without cars, elderly people, disabled people who find it difficult to get around, or people who work shifts. It may be necessary to arrange transportation or childcare for these people.
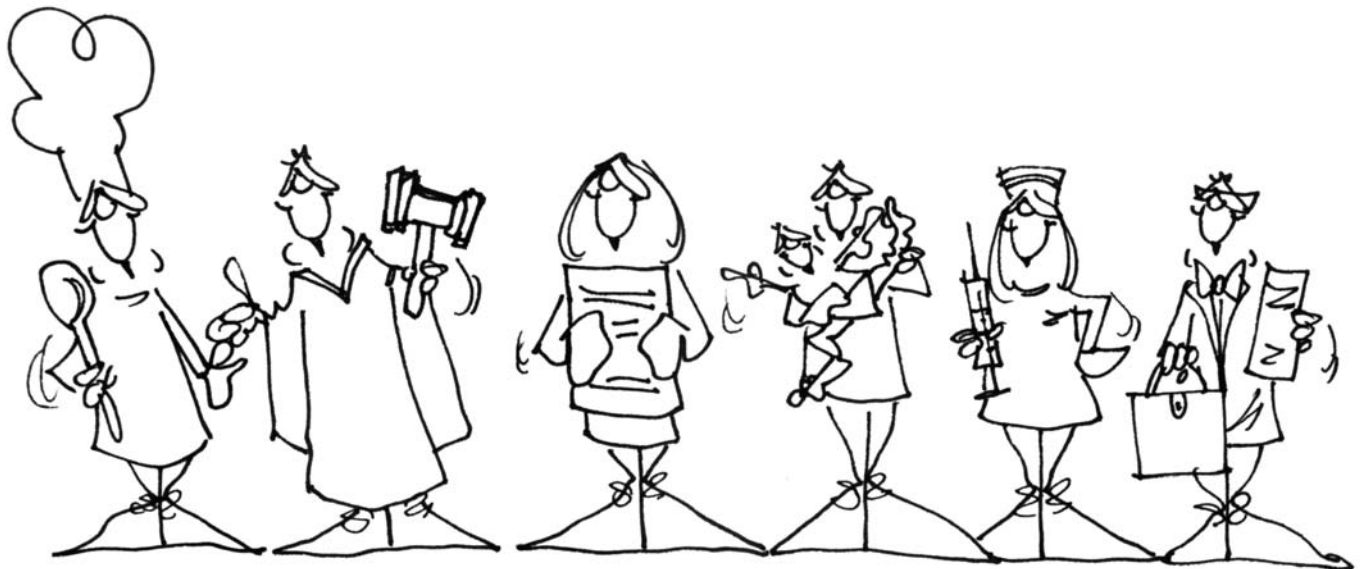
Explain Building Caring Communities

Explain the Building Caring Communities concept, using the audiovisual presentation and the handout that appear in the Tool Kit at the end of the workbook. During this presentation, emphasize that Building Caring Communities focuses on strengthening communities and on enhancing quality of life. You can describe the four principles of Building Caring Communities:

- **Prevention** – This project emphasizes promoting health and well-being, not fixing problems after they occur.

- **The determinants of health** – Our health and well-being are affected by factors in the physical and social environment, as well as by factors unique to us as individuals. Sometimes we can promote well-being by changing our physical and social environments.

- **Community strengths** – Recognizing and building on strengths of communities and individuals promotes well-being.

- **Community involvement** – The community as a whole has ownership of the process.

The Building Caring Communities process provides a framework so that communities can look at themselves, identify their strengths and decide how they can take action to make the community even better. This may be a new approach for some people, who are more used to identifying a problem and moving immediately to problem-solving.

When explaining the ideas behind Building Caring Communities, it may be appropriate to emphasize that this is a new way of looking at communities. It may require shifts in thinking – from community deficits to community strengths, from problem-solving to prevention, from a medical model of well-being to a recognition that many factors besides medical care influence health.

Describe the Benefits of Building Caring Communities

Building Caring Communities has the potential to change community environments so that citizens are healthier and have improved well-being. It has the potential to:

- Improve the physical and psychological well-being of individuals and of the population as a whole.

- Create a caring community with stronger connections between its members, a greater sense of belonging and responsibility for citizens, and a more supportive environment.

- Give communities and individuals a sense of control over some of the factors that affect health and well-being.

- Enhance community leadership skills because citizens gain experience leading meetings, speaking in public and writing educational materials.

- Reduce costs because fewer unhealthy people mean less health care spending.

It is important to describe these potential benefits during early discussions with community in order to move community members toward prevention and away from a focus on problems.

Respond to Community Questions

Some samples of questions that might be asked by community members are given in Figure 3 on the next page along with possible answers.

Figure 3: Community Questions and Answers

Question	Answer
What problem are we trying to fix here?	Building Caring Communities is about prevention – about preventing problems from arising. For example, if we can ensure that the community's water supply is clean and safe, we can prevent outbreaks of *E-coli* or *Cryptosporidium*. If we can keep the teenagers busy and occupied after school, we can prevent violence and vandalism. If we can reduce smoking, we can prevent many needless deaths. If we can build strong social networks for seniors and reduce isolation, seniors will have better physical and mental health. We're trying to prevent problems, not fix them after they occur.
How can we fund our projects?	Some projects may not need a lot of funding. Some can be accomplished through policy decisions or by setting different priorities for existing resources. For example, inspecting a town's water supply and sewage disposal is an important means of ensuring a quality physical environment. In many communities, this can be done with existing resources and won't require additional funding.
	A seniors' literacy program can increase seniors' independence and improve seniors' overall quality of life. This type of program can be held at a seniors' centre or town hall and the local newspaper used as a teaching tool. If other seniors serve as tutors, a seniors' literacy program is very low cost.
	When funds are needed, look within the community first. Does the town or city provide development grants? Does the health district have wellness grants available? Are local service clubs or businesses willing to contribute?
	In some cases, you may decide to apply for a grant from the federal or provincial government. In this situation, public health staff of your health district may be able to suggest possible grant programs. Building Caring Communities is not able to directly fund community projects.

Figure 3: Community Questions and Answers (Continued)

Question	Answer
Is the primary purpose of this project to reduce costs?	No. Building Caring Communities is a process that has the potential to make individuals healthier and communities stronger. Because healthier individuals usually require fewer social and health services, Building Caring Communities may reduce costs over the long run, but that is not its primary purpose.
Everyone is so busy, how can we reasonably ask people to sit on another committee and perhaps do more?	Lack of time is a problem for many people and relying totally on volunteers may not be the way to go. Here are some questions to get you thinking about human resources. • Can people who work for community agencies participate as part of their job? Possible participants include staff of the health district, town, city, First Nation, school, bank or credit union? • If the project receives a grant of any type, can some of the grant be used to pay a part-time or contracted facilitator or coordinator? • Are any youth groups or service clubs looking for a specific short-term project? • What about high school students? The Wellness 10 course has an optional module on volunteerism. If this module is taught in your school, can you involve students?
Is this an ongoing process or are we finished once we've gone through this process?	Communities will choose different types of activities. Some will choose short-term activities that can be completed in a few days, weeks or months. Others will choose on-going activities that don't have a specific ending. Regardless of which type of activities you choose, you will likely implement them using the seven-step Building Caring Communities process. People in the community will become experienced using the process and can apply it to future community programs and activities.
How can we get people who are often "invisible" to participate? For example, shift workers, people without cars, stay-at-home moms with young children, seniors, and people with disabilities are often invisible.	The first step is to identify people who are "invisible". Ministers and priests, social service workers, health care providers, and Meals-on-Wheels volunteers can help identify folks whose situation makes them invisible. The next step is planning to involve them – transportation to meetings and events will help, as well as childcare at meetings. In some cases, it may be appropriate to take the program to the people, for example, you can hold meetings or activities at the Food Bank where people come anyway, or at a seniors' complex where many people live.

Ask If Building Caring Communities is Appropriate for Your Community

When you are discussing Building Caring Communities with the broader community, take as much time as necessary to explain the concept and to answer questions. Then ask whether Building Caring Communities is right for your community.
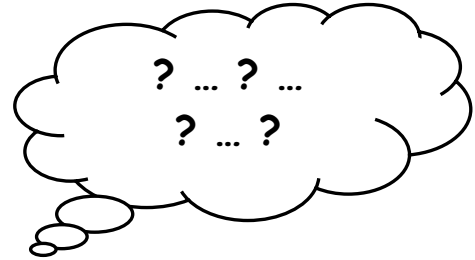
There may not be consensus on this topic, but if the majority of people seem interested and if there are individuals and organizations that are willing to commit time and energy, then proceed to the third step, which is learning more about your community.

Building Caring Communities in Action

Sturgis – Involving Community

The Sturgis Planning Group decided to involve the community by meeting with small groups that represent various interests within the community.

- The Building Caring Communities facilitator spent a day at the town's two schools and made eight presentations to students in Grades 4 to 12. Students completed a worksheet which asked them to identify Sturgis' strengths and describe what would make Sturgis an even better place to live. A copy of the overhead presentation used with high school students appears in the Tool Kit at the end of this workbook. A copy of a similar presentation for Grades 4 to 9 is available from Loraine Thompson, (306) 757-3206 or ltisl@sasktel.net.

- The Building Caring Communities facilitator spent an afternoon at the R.E.A.D. Club (seniors' club), made an oral presentation about the project and answered questions. Seniors were asked to give their ideas about Sturgis' strengths and to describe what makes it a good place to live.

- Mayor Don Olson spoke with town council about the project and got their feedback and comments.

- The Sturgis Building Caring Communities Planning Group devoted one meeting to a brainstorming session, in which they identified all of the Sturgis strengths – all of the things that make it a good place to live.

- Lillian Smith, a reporter for the local newspaper, attended the initial planning meeting and several meetings of the Sturgis Building Caring Communities Planning Group. Several times during the planning process Lillian took photographs and wrote articles which appeared in the local newspaper. This helped make the entire community aware of the project.

Step 3 – Learn More About Your Community

This section addresses three topics:

- Community Strengths
- Types of Community Strengths
- Identifying Strengths

Community Strengths

Every community and every individual has strengths and assets.

Living a productive life as an individual and being a strong and caring community depends upon whether those strengths are used, developed and strengthened. Individuals and communities whose gifts are recognized and

Building Caring Communities Process

1. Create a planning group
2. Involve community
3. **Learn more about your community**
4. Decide on community action
5. Plan specific activities
6. Implement specific activities
7. Reflect on your work

valued feel good about themselves, develop a positive view of themselves and keep on growing. The key to successful community building is to identify all the community's strengths and to link them together in ways that multiply their effectiveness.

This approach to community building is quite different from the traditional approach that begins with a needs assessment and emphasizes a community's problems and deficits. Always emphasizing problems breeds a sense of hopelessness and helplessness. Emphasizing problems also tends to convince citizens that outside intervention is necessary if the community is to become a better place to live.
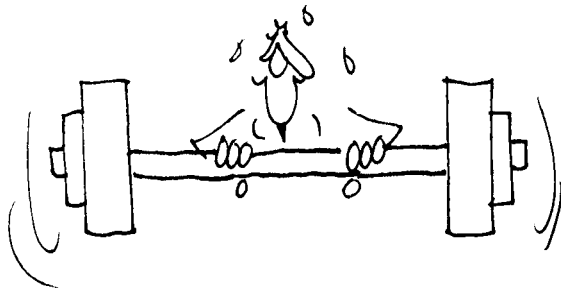
A strength-based approach shows communities that they have resources and strengths they rely on and that they don't need to be dependent on outside intervention.

A strength-based approach sees the glass as being half-full rather than half-empty.

Types of Community Strengths

Communities can have strengths relating to community structure. These include:

- Strengths in people – for example, individuals and groups who are willing to contribute their time and energy to make their community better

- Strengths in the way people work together – for example, a community history of working together to get things done

- Strengths in community facilities – for example, a lovely park, a good playground or skating rink

- Strengths in community services – for example, service clubs that contribute time and money to the community; businesses that support community activities through advertising and through in-kind and financial contributions.

Communities can also have strengths relating to the 12 determinants of health. For example, a community where most kids complete Grade 12 has a strength relating to education. A community that has playgrounds free of broken glass has a strength relating to the physical environment. Figure 2 on page 15 describes possible strengths in relation to the determinants of health in detail.

Identifying Strengths

Identifying community strengths has three elements:

- List Strengths
- Gather Information to Confirm Strengths
- Tell the Community About Its Strengths

List Strengths

Most communities will do a preliminary inventory of strengths through brainstorming sessions at meetings, and through interviews or focus groups.

Get discussion going by asking questions like:

- What are some of the strengths of this community?

- What is it about this community that makes life good for its members?

- What do you like about living in this community?

- What are some things about this community that help you cope when you or your family have problems?

Throughout the discussion, ask open-ended questions, probe for more information and summarize as required.

Some communities may do only one brainstorming session. Others will do several brainstorming sessions with different groups and will supplement the brainstorming sessions with interviews and focus groups. Whatever you decide to do in your community, be sure that you consult with a wide cross-section of the population. A teenager's ideas about your community strengths might be different from a senior's ideas. A stay-at home mom's ideas might be different from a farmer's. A low-income person's ideas might be quite different from a high-income person's ideas.

Eventually, some themes will emerge out of your preliminary inventory of strengths. Compile these themes into a list, and be sure to note when certain strengths relate more to one group of citizens than to another. Two forms in the Tool Kit at the end of this workbook will be helpful when you are compiling your community's strengths:

- *Strengths Relating to Community Structure* – Worksheet – Use this form to summarize your community's strengths in people, strengths in the way people work together, strengths in community facilities, and strengths in community resources.

- *Strengths Relating to Determinants of Health* – Worksheet – Use this form to compile your community's strengths relating to the determinants of health.

Developing a list of strengths is only one benefit of this process of focusing on and talking about strengths. The process gets people thinking about community strengths. It helps them recognize that their community has assets and positives as well as challenges.

Gather Information to Confirm Strengths

Your preliminary inventory of community strengths will be based, to a certain extent, on people's subjective opinions and impressions. In some cases, it may be appropriate to gather factual information to confirm these impressions. For example:

- If the community says that clean water is a strength, it may be appropriate to find out if the water is regularly lab-tested.

- If the community says that equitable income is a strength, it may be appropriate to check with Social Services to find out the percentage of population on social assistance or look at Statistics Canada census data to find out about percentages of people at various income levels.

- If the community says that a high student retention rate at the K-12 school is a strength, it may be appropriate to check with the school or school division to find out what the actual rate is and how this compares to the provincial student retention rate.

Figure 4: Sources of Statistical Information

Some communities may wish to collect statistical information about their communities. Here are some sources of statistical information.

- **Saskatchewan Health Covered Population** (most recent year) – This publication gives statistics for the people who hold Saskatchewan Health coverage, broken down by gender, age and place of residence. It also provides information about the age and gender of people living on First Nations. Available online and in print form. (http://www.health.gov.sk.ca/info_center_publications_covpop2001/main.htm)

- **Statistics Canada 2001 Census** – A wide range of data about population numbers and characteristics in Canada's cities, towns, villages and regions is available from the Census. (http://www12.statcan.ca/english/census01/release/index.cfm)

- **Indian and Northern Affairs Canada** – INAC has produced several publications which give information about First Nations populations in communities, provinces and across Canada. (http://www.ainc.inac.gc.ca/pr/sts/index_e.html)

Tell the Community About Its Strengths

Community strengths are something to celebrate. Tell as many people as possible about the strengths and assets of your community.

Some ideas for doing this include:

- Go back in person to each of the groups that participated in brainstorming sessions or focus groups, make a short presentation about your community's strengths and answer questions.
- Issue a media release to the local newspaper, TV and radio station.
- Arrange for an interview with the local newspaper, TV or radio station.
- Write a short article for inclusion in school, church and service club newsletters.
- Put posters on community, school and church bulletin boards.
- Put information on the websites of some of the Building Caring Communities partners.

Source: Some of the ideas in Step 3 have been adapted from:

Kretzmann, J. R., & McKnight, J. L. (1993). *Building Communities from the Inside Out: A Path Toward Finding and Mobilizing Communities' Assets*. Chicago, IL: ACTA Publications.

and

Raphael, D. et al. (2001). Making links between community structure and individual well-being: Community quality of life in Riverdale, Toronto, Canada. *Health and Place, 7*, 179-196.

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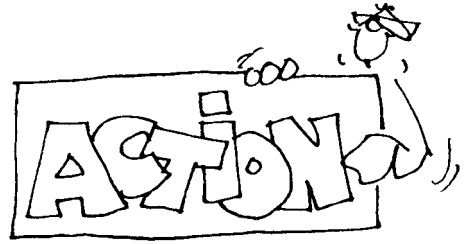
Sturgis – Community Strengths

All of the groups that participated in the Sturgis community consultations were asked about the community's strengths. The Sturgis Planning Group has this to say about the process of identifying strengths:

- *It was useful to look at strengths. Most communities have positive things going for them, but communities are so used to looking at problems and needs that they don't recognize all the positives.*

- *The community of Sturgis had past experience looking at strengths. The town council wrote a long-term (25-year) and a short-term (3-year) strategic plan in 1999. These plans include an analysis of strengths. Seniors' groups and tourism groups have done similar activities in which they identified strengths of the community and made plans for the future.*

- *A strength-based approach can work, but it requires a change in people's thinking. It may be useful to take a strength-based approach with some of the other committees in town.*
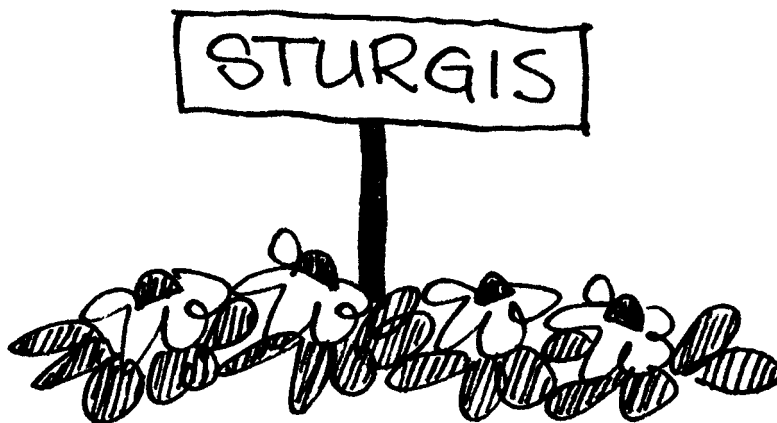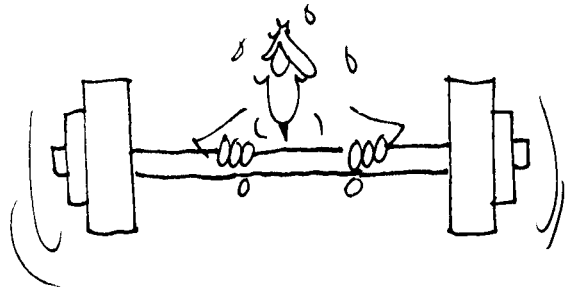
Building Caring Communities
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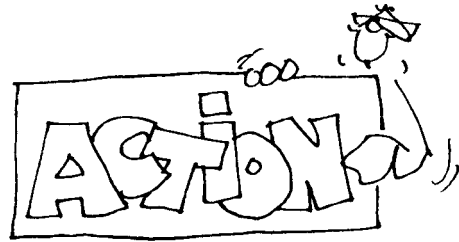
Sturgis – Community Strengths (Continued)

The following list of strengths emerged from consultations with various groups:

Sturgis' Strengths

**As identified by the Sturgis Building Caring Communities Planning Group,
Grade 4-12 school students, Sturgis R.E.A.D. Club.**

Social World

The social world is the way that people get along together – the way they live, work and play together.

- There is a sense of community and strong social networks. Everyone is included; the community isn't cliquey. People help each other and share.
- There is a high level of cooperation in the community – individuals work together and community groups work together. There are many leaders in the community.
- People are friendly and kind to each other, they smile at each other and say hello.
- People try to get along with each other, they don't argue or shout at each other. They try to compromise. There is respect for others' opinions.
- The way that people get along builds confidence. People are happy and no one is left out. Everyone feels that they belong.
- There are many different activities in the school and the community for people of all ages. These activities bring people together. Activities include hockey and lacrosse for kids and bowling for people of all ages, R.E.A.D. Club (seniors' club), 4-H Club, bingos, Riding Club, and church activities.
- There are lots of volunteers in the community, for example, parents take turns driving their kids to events.
- Local businesses are supportive of the community.
- Local organizations are strong. For example, Sturgis has:
  - good schools
  - five churches
  - a good library that loans books, organizes programs, and offers computer and high-speed Internet access
  - a good museum
  - the Family Resource Centre
- There are many special events and special days that bring people together, like mini-miracle, volunteer day, the upcoming RCMP Musical Ride, July 1, sports day, museum day.
- For several years, Sturgis has participated in Communities in Bloom, a Canada-wide community beautification program. Flowers and beautifully maintained lawns and gardens make Sturgis a very pleasant place to be in the summer.
- Service clubs like Kinsmen and Kinettes make an important contribution.
- The Health District staff and the Child Action Plan Committee contribute to well-being.
- People donate time and money to each other, to the school, to the community.

Building Caring Communities
in Action (Continued)

Sturgis – Community Strengths (Continued)

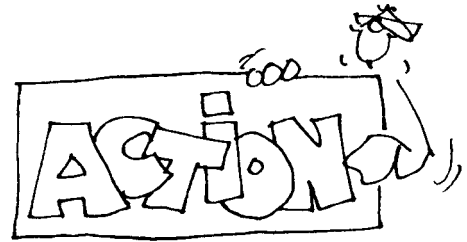The following list of strengths emerged from consultations with various groups:

Sturgis' Strengths

**As identified by the Sturgis Building Caring Communities Planning Group,
Grade 4-12 school students, Sturgis R.E.A.D. Club.** (Continued)

Physical World

The physical world is the environment around us. It includes the natural world, the streets and houses in our communities, and the air and water. The physical world also includes the safety of the communities in which we live.

- Sturgis is safe – there is very little violence.
- It is a very well kept town. Individual homeowners cut their lawns, plant flowers and rake leaves. The town workers spend a lot of time keeping the community nice; they plough the streets and cut the grass. The town is very clean.
- Sturgis has good facilities like the hockey rink and a new playground for elementary students.
- The school playground looks nice.
- Sturgis has clean air and water, and no pollution.
- Sturgis' natural setting is beautiful, particularly the river valley and the park.
- Sturgis is just the right size – not too big, not too small.
- Sturgis already has a few low-income housing units (but more are needed).
- The RCMP and the fire department help keep the community safe.
- There is good bus service to Yorkton.
- There are good community buildings and facilities.

The Individual

Ways that Sturgis helps individuals make healthy lifestyle choices:

- There are health classes and guidance counsellors at school.
- The school has a SADD program and the town supports SADD.
- There are lots of physical activities that people can get involved in to get exercise – sports at school like hockey, basketball, volleyball and lacrosse; senior bowling; a walking group; community activities like skating, curling, bowling and fishing.
- There is a place for kids to hang out and activities for kids to do so they don't get into trouble.
- The local Tuesday night bingo is smoke-free. You aren't allowed to smoke in the rink any more.
- The CO-OP promotes healthy food.

Ways that individuals contribute to their own health and well-being:

- The people are hard working and ambitious.
- There's always a good turn-out of seniors for flu shots.

Step 4 – Decide on Community Action

This section addresses the following topics:

- Choose a Focus for Action
- Select Specific Activities

Choose a Focus for Action

Deciding on a focus for action in your community involves identifying one or more determinants of health to work on and selecting specific activities. Some communities will identify the determinants of health they want to work on first

Building Caring Communities Process

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and then select activities that reflect those determinants. Other communities will identify specific activities that would enhance their community and then see which determinants of health these activities relate to. Regardless of which approach you take, keep your focus fairly narrow. Choose one or two determinants to work on – this is a manageable number. Plan for one to three activities that are realistic within the resources and people available.

When you decide on a focus for community action, refer back to the work you did in Step 3 of the Building Caring Communities process, "Learn More About Your Community."

Ask yourselves:

- What are the strengths of our community?

- What are our community's challenges?

- Is there anything in our community that requires immediate or emergency action?

- Which determinants of health and specific activities do community members have the most interest in and enthusiasm about?

Deciding on Community Action

When you select a focus for community action:

- *You might choose a determinant of health or an activity that is already a strength for your community, so that you can build upon and reinforce existing strengths.*

- *You might choose a determinant of health or an area of activity that is a challenge, so that you can build up a weak area.*

- *You might choose an aspect of the community that requires immediate action in order to improve physical safety in the community, assure a quality water supply, or prevent disease from spreading.*

- *You might choose a determinant where there is a lot of community interest and enthusiasm, because it will be easier to achieve success.*

Select Specific Activities

Figure 5 on the next three pages gives some ideas for activities relating to each of the determinants of health. This chart is intended to stimulate thought and discussion. Expand on it as you wish. It is not intended to be limiting or restrictive. It will be useful regardless of whether you choose a determinant of health first and then select related activities, or whether you select activities first and later identify the determinants of health that each activity supports.

In Building Caring Communities, the emphasis is on the process used to involve community, to make decisions and to develop an action plan. Although most communities will choose one or more activities that have specific benefits for citizens, individual and community learning and skill development also occurs because of the process.

Figure 5: Ideas for Specific Activities

| Social World	
Income and Social Status	• job creation projects • support for local businesses to create jobs • food bank; clothing, toy or book exchanges; used clothing store; so that people can stretch their money further
Social Support Networks	• organized activities that promote community-wide socializing – outdoor street craft fairs and concerts, farmers' markets, sidewalk sales, flower planting day downtown or in the park, community pancake breakfasts • organized activities that promote socializing among specific groups – block parties or potluck meals in specific neighbourhoods; sports, music or drama activities for preteens or teens; mom's day out programs for stay-at-home moms; music, cards, movies, discussion groups for seniors living in their own homes, in seniors' housing or in nursing homes • a clean up your street/neighbourhood day ending with a potluck supper • initiatives for isolated people to be more involved in community life. Isolated people can include those with disabilities, those who lack transportation, seniors, those whose culture differs from the mainstream.
Education	• stay in school programs for middle-years and high-school kids • family literacy programs • computer training for people of all ages • literacy programs for seniors • assertiveness and self-help programs in seniors' housing units • improved access to post-secondary courses and programs • developmental programs for K-12 students with learning and/or behaviour problems • used book, toy, magazine collection and distribution programs
Employment and Working Conditions	• programs to promote smoke-free workplaces • workplace noon-hour exercise programs • gender equity and harassment policies for public and private sector workplaces • self-help and support programs for farmers who have lost their land and people who have lost their jobs • stress reduction workshops in the workplace or the community • programs to educate workers about their rights – maternity leave, Employment Insurance, labour standards, harassment issues, occupational health and safety issues
Social Environments	• support and self-help programs for people with specific health problems (e.g., breast cancer, mental health issues, arthritis) or specific life circumstances (e.g., single parents, new widows or widowers, caregivers) • respite programs for caregivers of elderly people or people with severe disabilities • providing and promoting healthy food choices at community facilities

Figure 5: Ideas for Specific Activities (Continued)

Social World (Continued)	

Healthy Child Development	• programs that:
	  ▪ encourage moms to avoid alcohol, drugs and tobacco while pregnant
	  ▪ provide extra milk, fruit, vegetables and vitamins for pregnant and nursing women
	  ▪ promote breastfeeding
	  ▪ teach parenting skills
	
	• early intervention programs (Head-Start) for tots and moms
	
	• transportation to well-baby clinics, pre-natal programs, etc.
	
	• support programs that help families provide for their children's basic needs (e.g., food bank, school and community lunch programs, clothing exchanges, community gardens, community kitchen, used furniture depot)

Health Services	• training for health care providers so that services are culturally relevant and respectful of both women and men • transportation to health clinics for low income people and seniors • research and publish a list of people qualified to provide child care, elder care, palliative care and respite care
Physical World	
Physical Environments	• testing of community water supply and sewage treatment to detect and correct any potential problems • testing for radon and similar harmful gases • creating smoke-free environments in all public areas • reducing use of pesticides • activities to create a hazard-free physical environment – cleaning up broken glass, filling in unfenced pools of water, fencing off busy roads • programs to reduce community violence – neighbourhood watch programs • programs to reduce alcohol and drug use and thus reduce the violence often related to alcohol and drugs • sports programs to keep kids occupied and out of trouble and thus reduce violence and vandalism • programs to increase the supply of safe, affordable housing • placing garbage cans in every block downtown and in all parks and playgrounds • Neighbourhood Watch and Block Parent Programs, COPPS program • education for families, farmers and businesses about safe use and storage of chemicals • providing and promoting healthy food choices in community facilities • recycling programs for cans, bottles, newspapers, cardboard, etc. • community planting programs, to plant trees and shrubs in vacant lots and parks and reduce weeds • air quality programs that address stubble burning

Figure 5: Ideas for Specific Activities (Continued)

The Individual	
Personal Health Practices and Coping Skills	• stop smoking programs • anger management, conflict resolution, assertiveness programs • walking clubs so that people have others to walk with • increasing the number of healthy food choices at the local rink, school or other public facility and reducing the availability of junk food • community garden and community kitchen programs • activities to promote the use of community and business facilities (schools, town office, mall, warehouse) for physical activity programs and personal growth workshops • enforce use of seatbelts
Biology and Genetic Endowment	• targeting programs to specific at-risk groups, for example, diabetes prevention and treatment to Aboriginal people, osteoporosis prevention to women of Northern European and Asian background • programs to help people research their family history to identify cancers and inherited diseases that may have a genetic component
Gender	• safe homes for women and children who have experienced family violence • affordable day care programs • planned and emergency respite programs for mothers and caregivers • health fairs and programs that educate health care providers and the public about both men's and women's health issues • promote healthy body images for both genders • educate young males about risky behaviours common to this age group (fast driving, drinking, etc.) and about ways of avoiding peer pressure
Culture	• involve elders in designing community programs so they are culturally appropriate • education and encouragement to teach youth cultural and racial acceptance • research and publish a list of interpreters available in the community • community activities that bring cultural groups together and/or celebrate our cultural differences • emphasis in the school program on the positive roles that various cultural/ethnic groups have played in history

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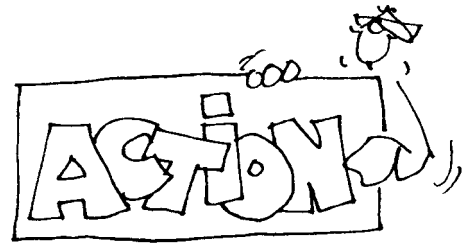
Sturgis – Deciding on Community Action

When the Sturgis Planning Group began discussing action that would make their community stronger, they focused on two groups – youths and seniors – and brainstormed a list of possible projects. However, discussion soon centred on a transportation program for seniors.

Sturgis has a large population of seniors and no taxi service. Some seniors do not have cars. These include low income seniors, women who have never learned to drive and seniors whose driving skills are no longer up to par. Lack of transportation becomes a particularly serious problem in winter, when ice and snow make walking difficult. Rev. Miles Russell, the local United Church Minister and a member of the Sturgis Building Caring Communities Planning Group, had been concerned about this issue for some time and had investigated various ways of addressing it.

The Sturgis Planning Group then reviewed the determinants of health and saw that a transportation program relates strongly to Social Support Networks. Transportation reduces seniors' isolation and makes it possible for them to participate in community life. Going to church, visiting friends, going to the hairdresser, getting groceries all provide opportunities to interact with others and to feel connected. Research shows that people with a strong social network and regular interaction with friends, family and community members, tend to have better physical and mental health than people who are isolated.

Step 5 – Plan Specific Activities

After you identify the specific activities your community is going to work on, you can begin planning to accomplish the activities. Planning usually involves three tasks:

- Make a Work Plan for Each Activity
- Obtain Resources
- Plan for Evaluation

Each of these aspects of planning is described in more detail in the sections that follow.

Detailed planning at this stage helps ensure that work plans build on community strengths and that

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activities occur efficiently and effectively. Planning has another benefit. It gives community members practice developing budgets, establishing timelines, creating schedules. In short, it is a vehicle through which community members can enhance their organizational and leadership skills.

Make a Work Plan for Each Activity

This is the stage at which you use the strengths of your community to accomplish a goal. It's where you ask yourself, "How can the strengths we have identified be best used to achieve this task?"
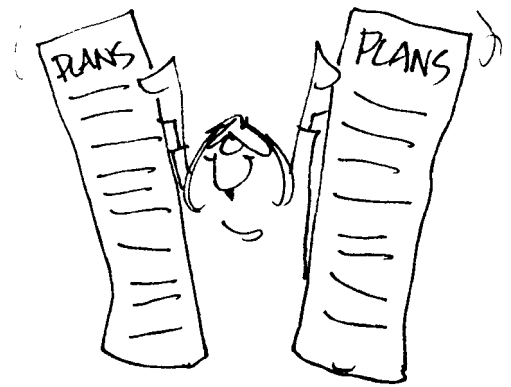
Figure 6: Components of a Work Plan

A typical work plan includes:

- a brief description of the goal you wish to achieve with the activity
- a brief description of the activity, identifying the determinant of health to which it relates and giving a two or three sentence overview
- a summary of the community's strengths
- a list of the various separate tasks that must be done as part of the activity
- identification of the individual or group that will do each task
- a breakdown of the facilities, equipment and supplies that will be needed for each task
- a breakdown of the cost for each task within the activity
- a timeline for the activity

Other things to consider when planning each activity include:

- Think of innovative ways of accomplishing the activity so that you reach the maximum number of people, for example, a diabetes prevention workshop held in the local drugstore or a fat-free cooking demonstration held in the grocery store might attract more people than events held in health district offices. An adult literacy program held in a town hall, First Nation administration centre, or local library might attract more people than one held in a school.

- Take programs to where the people are: seniors' apartment buildings, social housing complexes, schools, regional colleges, food bank. Don't always expect people to come to the program. Consider workplace programs like workplace literacy programs and noon-hour exercise programs.

- Provide transportation when necessary. Attending programs and events may be difficult for seniors and people without cars.

- Involve the private sector whenever possible. Events like street fairs, farmers' markets, and street entertainment provide opportunities for socializing and building a sense of community spirit. They are also good for local merchants' businesses. Thus, local merchants may be willing to help organize them. Retail businesses may be willing to hold programs in their shops if there is the potential of attracting more customers. For example, a nutrition workshop in a grocery store may attract customers to the store. Promote the health initiatives of local businesses, for example, praise and publicize the restaurants that offer "heart healthy choices" on their menu.

- Try to create employment when you can. Some projects relating to the physical environment may involve unskilled labour, for example, picking up broken glass, fencing roads and dangerous areas, filling holes, basic landscaping. Although none of these tasks will provide full-time employment, students and people who work at part-time jobs would be grateful for the extra money.

- Buy supplies and equipment locally to support the local economy.

Sample Work Plan

Figure 7 below gives a sample work plan. Before developing your work plan, refer back to your community's strengths and use these strengths in the work plan. In this community, some of the strengths are a service club that is willing to commit to a specific project for a limited period of time and a town council that is willing to commit town resources to make the community safer. These strengths were used to maximum advantage in the work plan. The Tool Kit at the end of this workbook includes a blank form that you can use to develop your work plan.

Figure 7: Sample Work Plan

Determinant of Health – Physical Environment				
Goal:	To make the physical environment safer for children and to reduce the potential of insect-borne disease.			
Activity:	Fill in or remove pools of water where a child might drown and mosquitoes might breed.			
Community Strengths:	Service clubs willing to commit to a specific project for a limited time. Town council willing to commit town resources to specific safety projects.			
Overview:	The service club agrees to identify danger sites. A town crew will fix danger sites on public land. This plan is approved by the mayor and town council.			
	For danger sites on private land (e.g., construction sites, people's yards) the owner will be sent a letter. If the owner does not fix the problem within 30 days, a city crew will fix it and the owner will be billed.			

Task	Who Will Do It?	Facilities/Equipment/ Supplies Needed	Cost	Timelines
Identify danger sites	Service club	None	None	Weeks 1 and 2
Report on all sites to town office	Service club	None	None	Week 3
Town crew fills in sites on public land	Town crew under supervision of works foreman	• All equipment already owned by town • Some gravel, cement, etc. needed for fill	• No direct cost for labour • About $500 for gravel and concrete	Weeks 4 to 8
Town writes to owners of danger sites on private lands telling them to fix hazards	Clerical staff at town hall	• Computer already owned by town	• No direct cost for labour • About $10 for postage	Week 4
Danger sites on private land are inspected to see if they have been fixed	Service club	None	None	Week 8
Town crew fills in any danger sites that have not been fixed	Town crew	• All equipment already owned by town • Some gravel, cement, etc. need for fill	None	Week 10
Town sends bill to appropriate landowners	Clerical staff at town hall	• Computer already owned by town	• No direct cost for labour • About $8 for postage	Week 12

Obtain Resources

The resources needed for most projects include staff, equipment, facilities, supplies and transportation. These can be obtained in two ways – through in-kind donations and through purchase of goods and services.

In-Kind Donations

Local organizations and businesses may be willing to provide in-kind donations. For example, a First Nation may provide space to hold a program, a government department may allow one of its staff members to work part-time on a project, a business may donate supplies in return for public recognition. Many projects can be accomplished primarily through in-kind donations or through reallocation of existing resources. In some circumstances, private businesses or individuals that contribute in-kind goods or services are eligible for a tax receipt. Check with your village/town/city/First Nation business office.

Sources of Funding

In some cases, however, money will be needed to purchase supplies, to rent or buy equipment, and to pay a facilitator or other staff.

Below are some possible sources of funding.

- First Nation – Some First Nation governments are able to support community activities.

- Village/Town/City/Rural Municipality – Some municipal governments provide social development grants for community-based projects. Ask at the town/city/RM office.

- Health District – Some health districts provide grants for community-based projects. Ask at your health district office or look on the health district website.

- Provincial and Federal Government Departments – Government funding programs change often.
  The public health staff at your health district may have information about current government funding available. The booklet, *Funding Opportunities for Saskatchewan Women and Families* provides information about government grant programs. It is available from the Status of Women Office at Saskatchewan Labour.
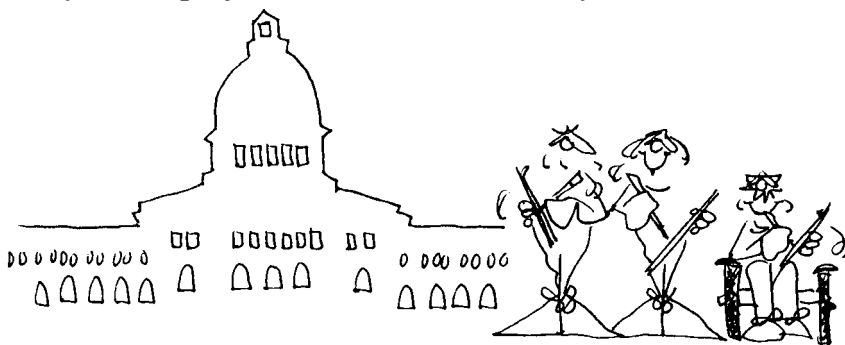
- Local businesses – Some local businesses may be willing to give in-kind donations, particularly if they receive public recognition for their contribution. You may, under some circumstances, be able to give a tax receipt for in-kind donations, if one of your Building Caring Communities partners is permitted by the Canada Customs and Revenue Agency to give tax receipts for donations. Check with the Canada Customs and Revenue Agency for a ruling in your particular situation.

Tips for Applying for Grants

Most funding agencies have their own grant applications. Get an application form for the grant you are considering. Each application form is different so read them carefully. Below are some tips that apply to most grant applications.

- Some funding bodies will accept applications from established institutions (like a school division, regional college or Friendship Centre) or from non-profit organizations that are registered with the Corporations Branch, Saskatchewan Justice. Most government funding agencies will not accept applications from ad hoc groups. If this is the case in your situation, work through an established institution or group in your community.

- Many funding bodies require that funded projects be partnerships between two or more community agencies. Your project has a greater chance of being accepted if two or more organizations are cooperating.

- Most funding agencies emphasize goals and outcomes – what the project will achieve. In your application, give details about what you hope to achieve. A list of program activities isn't enough.

- Most funding agencies require that grant applications include an evaluation plan – a description of how you will determine whether your project has achieved its goals.

- Include a work plan showing what activities will occur when and a detailed budget showing both in-kind and cash contributions.

Plan for Evaluation

Evaluation will tell you whether you have achieved your goals. The type of evaluation you do will depend on the nature and complexity of your projects.

As a minimum, your evaluation plan should include:

- a statement of the goals or outcomes that you hope to achieve
- evaluation questions
- a description of the data you will collect to answer the evaluation questions.

A sample evaluation plan appears in Figure 8. A form that you can use to develop your evaluation plan appears in the Tool Kit at the end of this workbook.

Figure 8: Sample Evaluation Plan

Goal	• To make the community safer by filling in holes that have standing water.
Evaluation Questions	• How many dangerous holes are there in the community? • How many of these holes did we fill in?
Data Collection	• Count the number of dangerous holes in total. • Count the number of holes filled in either by private citizens or town crews.

It is important to plan for evaluation before you actually start implementing your projects. It is often easy to collect data while a project is underway, but much more difficult afterwards. For example, if you want to know the number of people who attended a meeting, it is easy to count during the meeting, but almost impossible to figure out weeks or months after the event.

For more detailed information about evaluation refer to:

Saskatchewan Health. (1999). *Evaluation Planning Guide: Population Health Promotion Demonstration Sites for Primary Prevention of Diabetes*. Regina, SK: Author.

Building Caring Communities in Action
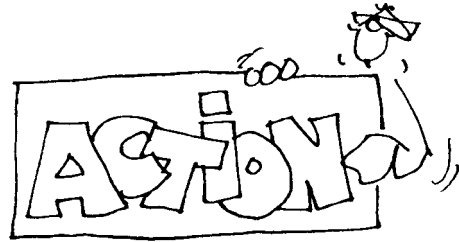
Sturgis – Planning for a Community Transportation Program

The Sturgis Planning Group recognized that a community transportation program would enhance the well-being of seniors in the community. The first stage in planning for this program was a research phase.

The Building Caring Communities facilitator got information from Saskatchewan Government Insurance (SGI) concerning the regulations for volunteer driver programs. These regulations specify that a volunteer driver program must be set up under the auspices of certain types of community organizations, which have liability insurance. SGI regulations also specify the fees volunteer drivers can charge to recover their costs.

The Building Caring Communities facilitator contacted about a dozen other communities that have transportation programs and compiled the findings into a short report.

Early in the planning process, the Sturgis Planning Group realized that a Community Transportation Program already existed. The Community Program Coordinator for Assiniboine Valley Health District had, for some time, operated a transportation program that serves home care clients, primarily for medical appointments and the annual Christmas lights tour. It was decided to use community resources to expand and enhance the existing program rather than to set up a new or separate program. It was also decided that the Community Transportation Program would operate in the Sturgis/Preeceville/Endeavour area which is the area served by the Community Program Coordinator for Assiniboine Valley Health District.

The Community Transportation Program will be an enhancement of the program that the Community Program Coordinator for AVHD currently operates. It will operate in the Sturgis/Preeceville/Endeavour area. It will:

- *Add more drivers to the existing program*
- *Expand the existing program to social as well as health-related events*
- *Make more people aware of the program*
- *Add support and training for drivers to the existing program*
- *Make the program available to all those who need it, not just home care clients*

It will operate under the authority of the Assiniboine Valley Health District and drivers will be covered under AVHD's liability insurance.

There will be a program contact in each of the three participating communities.

Building Caring Communities
in Action (Continued)
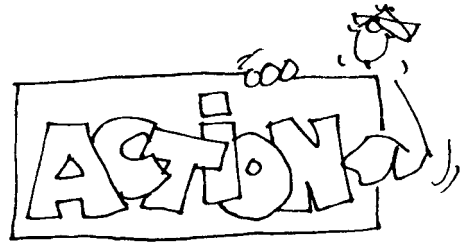
Sturgis – Planning for a Community Transportation Program
(Continued)

More drivers will be recruited and added to the existing list of drivers. This list of drivers will be distributed to seniors and also made available through local churches, the town office, doctors' offices, seniors' groups, etc. People who need a ride will call a community driver on the list in order to make arrangements for the ride. All arrangements concerning dates, times, etc. will be between passenger and driver. Each driver will keep a log of trips, showing dates of trips, destination and number of kilometres. Drivers' trip logs will be turned in monthly and totaled in order to collect statistical information about use of the service, peak times, etc. The Family Resource Centre Coordinator will compile these statistics on a spreadsheet and prepare an annual statistical report.

Arrangements concerning the fee that passengers pay will be between the driver and the passenger. However, drivers will get together initially and then yearly after that to set recommended fees. This will help ensure fairness for both driver and passengers.

A Community Transportation Board will provide overall direction for the project. This Board will consist of some (or all) of the people who are presently members of the Sturgis Planning Group, plus representatives from Preeceville and Endeavour. This Board will meet every six to 12 months to review how the Community Transportation Program is going and make appropriate adjustments

Note: Sturgis was a pilot site for the Building Caring Communities process. Thus, a part-time, contracted facilitator was able to work with the community. This facilitator did research about transportation programs, prepared minutes of meetings, and supported the community in other ways. Most communities will not have access to a facilitator so community members will be responsible for research, preparing minutes, etc.
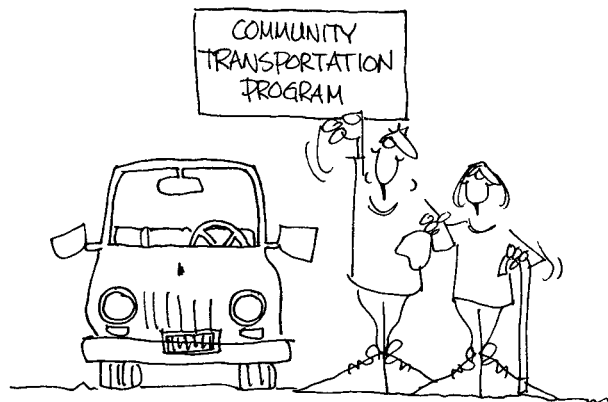
Step 6 – Implement Specific Activities

This section addresses three topics:

- Monitor Progress
- Celebrate Your Successes
- Re-energize

Monitor Progress

Implementation is the stage at which you put your plans into action. Careful monitoring is necessary throughout because things may not go exactly as planned. For example, you may have more or fewer people interested in a program than planned, a key person might get

Building Caring Communities Process

1. Create a planning group
2. Involve community
3. Learn more about your community
4. Decide on community action
5. Plan specific activities
6. **Implement specific activities**
7. Reflect on your work

sick and be unable to help, timelines might change, some agencies that promised support might not come through, or a new agency may decide to participate midway through the project.
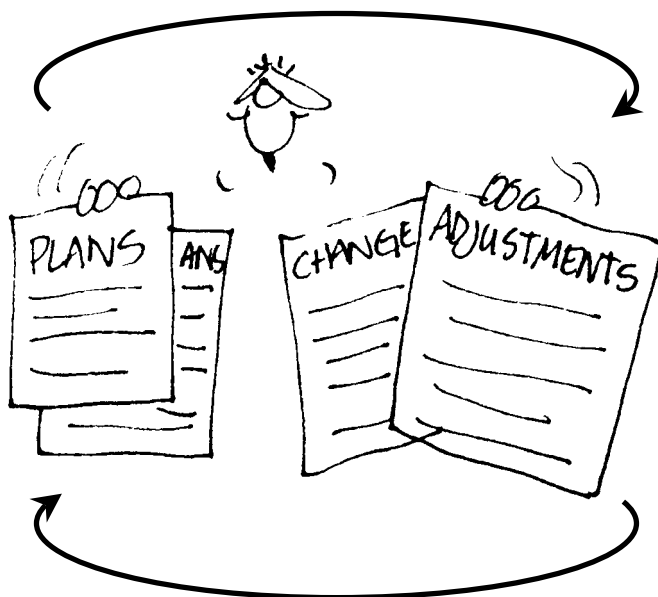
You will have to make adjustments as you go along in order to accommodate unexpected events.

It is also important to keep the community informed throughout the implementation phase and to involve the community if any major decisions or changes are needed.

Celebrate Your Successes

In any activity, there are bound to be changes and setbacks – things don't go quite as planned, your timelines change, a couple of people you were counting on didn't follow through. Don't dwell on setbacks. Your project probably also had many successes. The fact that you are at the sixth step of the process is an achievement. There were probably also many people who contributed time and energy and, with their drive and enthusiasm, made the project happen. You likely received in-kind donations and may also have received actual cash. These are successes to be celebrated. Make sure that you identify your successes and tell everyone associated with Building Caring Communities about those successes.

Re-energize

Getting a project up and running takes a lot of time and energy. Some of the original members of your planning group may be tired. Here are some ideas for re-energizing your planning group and Building Caring Communities as a whole:

- Invite new people to become involved, then some of the members of the original planning group can step back into an advisory role.

- Recognize and honour the hard work of the people who have been with the project since the beginning. Recognition can take many forms, including profiles in the local newspaper, a thank-you ceremony and/or lunch, the honoured position in the local Canada Day parade, being the guest of honour at a school assembly, etc.

- Change jobs, so that members of the planning group are doing something different than they were at the beginning. After all, a change is as good as a rest.

Building Caring Communities in Action
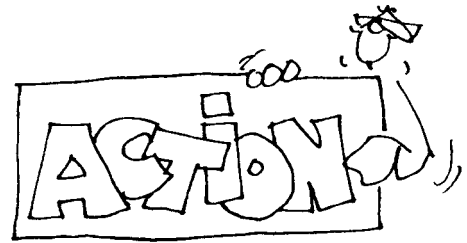
Sturgis – Implementing a Community Transportation Program

At the time of this writing, Sturgis is in the process of implementing the Community Transportation Program. Issues that are being addressed include:

- **Involving Preeceville and Endeavour** – Mayor Don Olson wrote a letter to the town councils of Preeceville and Endeavour informing them about the project and inviting their participation. The Family Resource Centre Coordinator (Craig Folk) will be making presentations to the town councils and seniors' clubs of these two communities.

- **Publicizing the Community Transportation Program, informing potential passengers and recruiting drivers** – The Building Caring Communities facilitator prepared a handout and poster to use during promotional work. The poster will be put up in stores, doctors' offices, churches and other places where seniors go. Options for distributing the handout are being discussed. These options include:
  - putting a handout in the mailbox in Preeceville, Sturgis and Endeavour
  - keeping a supply of handouts at the town office and giving them to people who come to the office
  - distributing handouts at local churches.

- **Training for drivers** –
  - The Community Program Coordinator for Assiniboine Valley Health District will be offering an SGI 55 Alive driver refresher course in the fall. Community drivers will be encouraged to take this course.

  - The Family Resource Centre Coordinator will give a workshop to community drivers on dealing with people. This workshop will focus on basic communication and interpersonal skills and include tips on dealing with difficult people.

  - The Assiniboine Valley Health District physiotherapist and behaviour management consultant will give workshops on dealing with people with disabilities and age-related frailty, and dealing with people who are confused or disoriented.

Building Caring Communities
in Action (Continued)
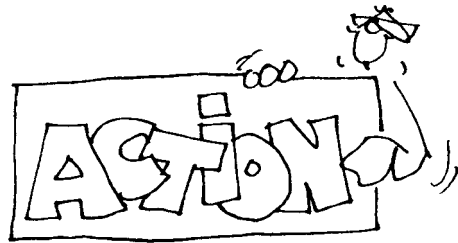
Sturgis – Implementing a Community Transportation Program
(Continued)

- **Community contacts** – There will be a contact for the program in each community. In Sturgis, it will be the Family Resource Centre Coordinator. In Preeceville, it probably will be the Community Program Coordinator for Assiniboine Valley Health District. Work is underway to identify a contact for Endeavour.

- **The Community Transportation Management Board** – A board will oversee the operation of the Community Transportation Program. The composition of this board is being finalized. Likely some (or all) of the members of the Sturgis Planning Group will be willing to serve and members from Preeceville and Endeavour will be added.
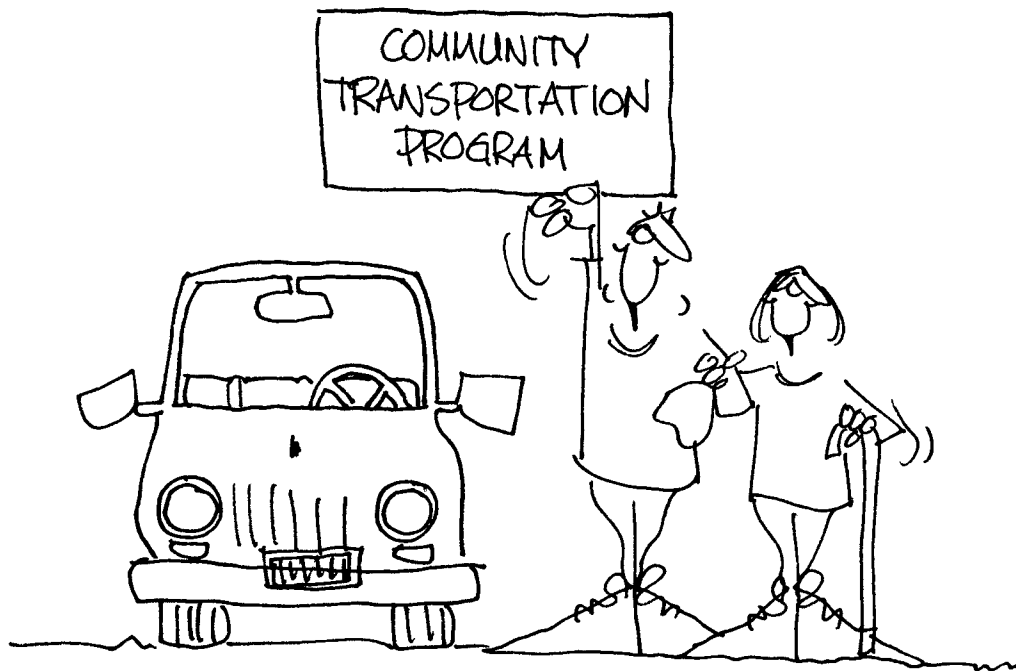
Step 7 – Reflect on Your Work

This section addresses three topics.

- Use Evaluation Data
- Identify Learnings
- Tell Others About Your Work

Use Evaluation Data

When you planned specific Building Caring Communities activities you identified desired goals and outcomes. Throughout the project you probably were collecting evaluation data. Near the end of the project you can put it all together and assess the extent to which you achieved your goals.

Building Caring Communities Process

1. Create a planning group
2. Involve community
3. Learn more about your community
4. Decide on community action
5. Plan specific activities
6. Implement specific activities
7. **Reflect on your work**

This is also a good time to evaluate the process you used and to ask yourselves questions like:

- What things went as expected?
- What surprises did we encounter along the way?
- How did we respond to unexpected events (both positive and negative events)?
- What would we do differently next time?
- What would we do the same next time?
- What is the best advice we can give to communities that are just starting out with Building Caring Communities?

Identify Learnings

Every time you do a project, you learn something about what works and what doesn't work. These are learnings that you can apply to other projects in the future. For example, you might learn that decision making by consensus works better than majority vote (or vice-versa). You can bear this in mind the next time you do a similar project. Or you might learn that people are willing to commit to a project if they have a good idea beforehand about the amount of time they will be expected to give and how long the project will last.

It is often useful at the end of a project to sit down and make a written list of five or six important things that you learned that have relevance to future projects.

Tell Others About Your Work

At the end of a project, it's important that you tell both your own community and other communities about the outcome of the project.

Tell Your Own Community

It's important to give your own community a brief summary of the project and to tell about results achieved. In your summary, celebrate your community and what it has achieved. Emphasize the strengths of your community and the growth that has occurred. This can be done in any or all of the following ways:

- Put up posters all over town.

- Hold a community meeting.

- Host a media event.

- Send a media release to local newspapers, radio and TV stations.

- Ask individuals who represented various organizations during the project to make a presentation to the groups they represent.

- Put short articles in local school, health district, REDA, church and community newsletters.

- Put information on the websites of partner organizations.

Tell Other Communities

Other communities can learn from your work. When you share with other communities emphasize the process that you followed and provide full details about what went well and what didn't, so that other communities can build on what you've done.

Putting a detailed description of the project on the health district, town/city and/or First Nation website is a very effective and inexpensive way to share information. Making presentations to key people in other communities and at professional conferences is also useful. Some communities may wish to publish a booklet describing their work, but this involves the cost of printing and the nuisance of mailing out printed copies. Thus, a printed booklet may not be right for every community.

Building Caring Communities in Action
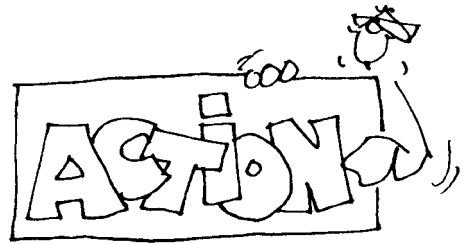
Sturgis – Reflecting on the Community Transportation Program

The Community Transportation Program will be evaluated every year to find out what's working, what needs to be changed, whether more or less promotion is needed, whether the training provided benefits drivers, etc.

The Community Transportation Management Board will organize the evaluation. They will use the following evaluation tools:

- Formal or informal consultations with drivers and passengers.

- Statistics collected about the program, giving information about number of trips, destination, day and time of trips, etc. These statistics will be based on the drivers' trip logs.
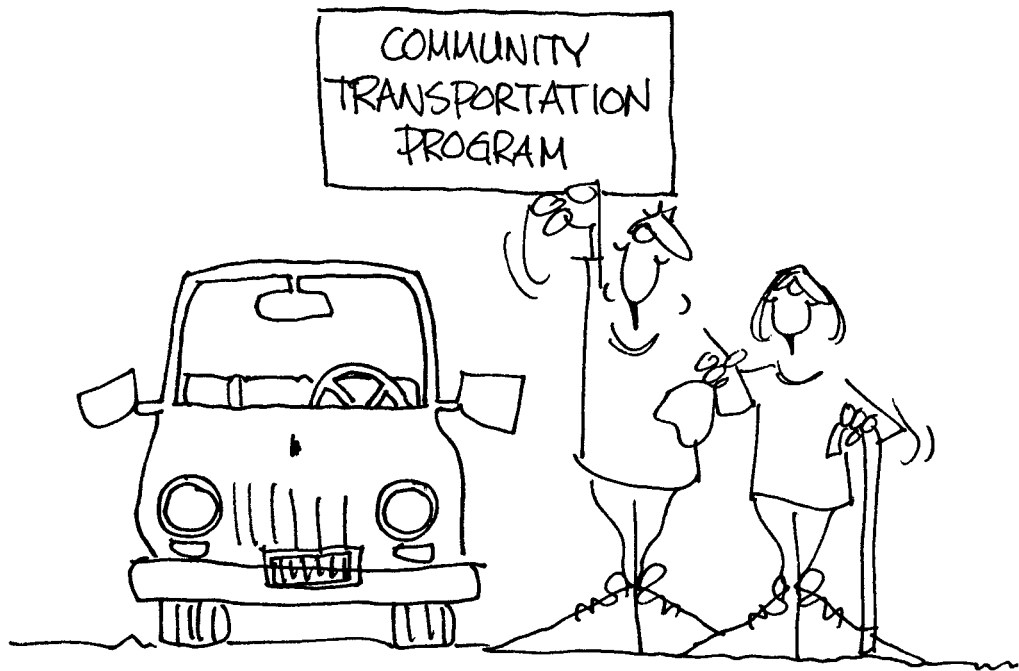
Part 3: For More Information

Part 3: For More Information includes sections on:

- Materials Available From Saskatchewan Health's Resource Centre
- Useful Websites
- Other information

For More Information
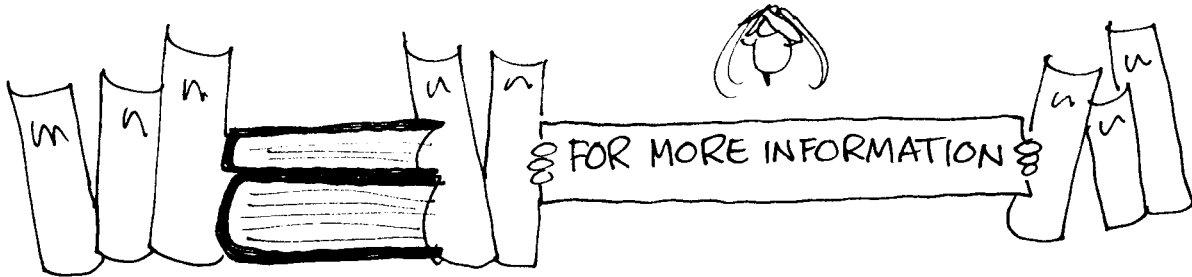
From Saskatchewan Health's Resource Centre

Saskatchewan Health maintains a large resource centre containing books, journals, videotapes, and other materials on all aspects of health. Most of these materials are available for loan. The Health Resource Centre's catalogue can be searched online. Contact the Health Resource Centre at:

> Saskatchewan Health Resource Centre
> Main Floor
> 3475 Albert Street (T. C. Douglas Building)
> Regina, Saskatchewan
> S4S 6X6
> Phone: (306) 787-3090
> http://www.health.gov.sk.ca/info_center_resource.html

An example of material available from the Health Resource Centre is:

British Columbia, Ministry of Health and Ministry Responsible for Seniors. (n.d.). *The Determinants of Health: Making Decisions for a Healthier Population.* [Videotape.]. Victoria, BC: Author. (10 minutes) – An excellent videotape. Emphasizes that health is not determined by the quality of health care alone and that communities can influence many of the factors that determine health. The examples are taken from B.C., but also have relevance to Saskatchewan.

Useful Websites

Association of Ontario Health Centres (http://www.aohc.org/determinants.asp#start) – A simple description of the relationship between employment, isolation, poverty and health.

Canadian Health Network (http://www.canadian-health-network.ca/) – Click on "determinants of health" in the list of subjects on the first page of the website.

Community Capacity Building (http://www.participation.net/final/main.php3) – This is a large portal maintained by the Government of Canada. It contains links to dozens of Internet resources on community development and community capacity building. (The Building Caring Communities process is basically a community development process.)

Health Canada (http://ww.hc-sc.gc.ca) – Click on *A-Z index*, then on *determinants of health* and/or *population health*. The contents of this website change frequently. There usually are several dozen studies and articles on the preventative approach to health under these two headings.

Saskatchewan Health (http://ww.health.gov.sk.ca) -- The contents of this website change frequently. Search under *determinants of health,* or *health promotion*, or *population health*.

Other Information

Federal, Provincial and Territorial Advisory Committee on Population Health. (1994). *Strategies for Population Health: Investing in the Health of Canadians*. Prepared for the Meeting of the Ministers of Health, September 1994. Ottawa, ON: Author. Health Canada Catalogue No. H39-316/1994.

Government of Saskatchewan. (2000). *Saskatchewan Human Services: Working With Communities*. Regina, SK: Author.

Hamilton, N., and Bhatti, T. (1996). *Population Health Promotion: An Integrated Model of Population Health and Health Promotion*. Ottawa, ON: Health Canada, Health Promotion Development Division.

Health Canada. (1986). *Achieving Health for All: A Framework for Health Promotion*. Ottawa, ON: Author.

Health Canada. (1992). *Heart Health Equality: Mobilizing Communities for Action*. Ottawa, ON: Author. Health Canada Catalogue No. H39-245/1992E.

Health Canada. (1996). *Toward a Common Understanding. Clarifying the Core Concepts of Population Health: A Discussion Paper*. Ottawa, ON: Author. Health Canada Catalogue No. H39-391/1996E.

Health Canada. (1998). *Taking Action on Population Health: A Position Paper for Health Promotion and Programs Branch Staff*. Ottawa, ON: Author. Health Canada Catalogue No. H39-445/1998E.

Kretzmann, J. R., & McKnight, J. L. (1993). *Building Communities from the Inside Out: A Path Toward Finding and Mobilizing a Community's Assets*. Chicago, IL: ACTA Publications.

Raphael, D. et al. (2001). Making links between community structure and individual well-being: Community quality of life in Riverdale, Toronto, Canada. *Health and Place, 7*, 179-196.

Saskatchewan Health. (1999). *Evaluation Planning Guide: Population Health Promotion Demonstration Sites for Primary Prevention of Diabetes*. Regina, SK: Author.

Saskatchewan Labour, Status of Women Office. (most recent edition). *Funding Opportunities for Saskatchewan Women and Families*. Regina, SK: Author – This booklet is updated frequently and provides a comprehensive listing of funding programs.

Stephens, T. (1998). *Population Mental Health in Canada*. Ottawa, ON: Health Canada, Mental Health Promotion Unit.

Part 4: Tool Kit
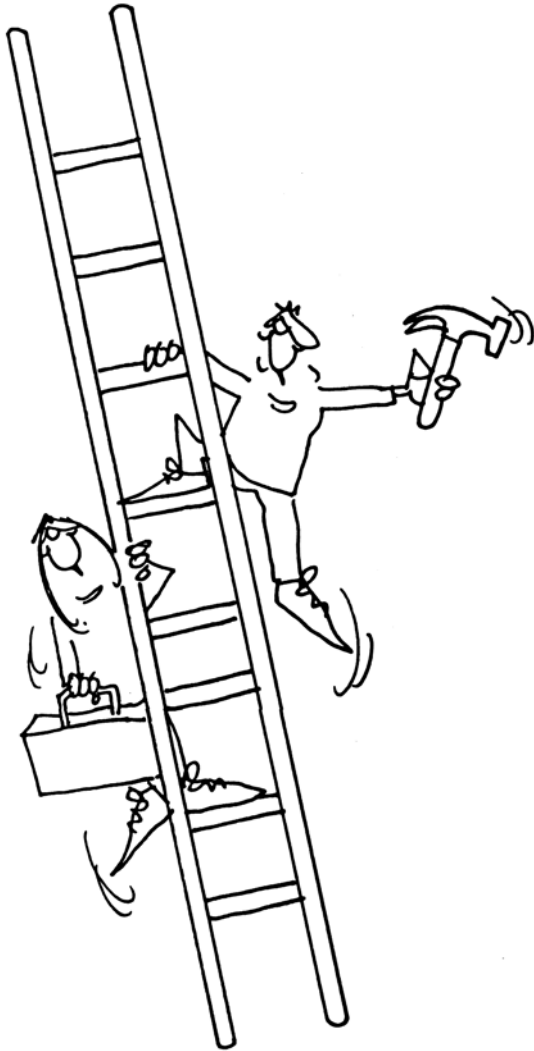
This tool kit includes the following educational materials and forms:

- **Building Caring Communities – An Overview –** Distribute this pamphlet at meetings to give community members an overview of the Building Caring Communities process.

- **Building Caring Communities PowerPoint Overhead Presentation** – Deliver this presentation at meetings to inform the public about Building Caring Communities. To get an electronic copy of this presentation, contact Loraine Thompson, (306) 757-3206 or ltisl@sasktel.net. This presentation is suitable for high school students and adults. A simpler version for Grades 4 to 9 students and accompanying student worksheets are available from Loraine Thompson.

- **Strengths Relating to Community – Worksheet** – Use to summarize your community's strengths.

- **Strengths Relating to Determinants of Health—Worksheet** – Use to summarize your community's strengths.

- **Work Plan – Worksheet** – Use to develop a work plan for each activity you decide to undertake.

- **Evaluation Plan – Worksheet** – Use to make an evaluation plan for each activity you undertake.

Building Caring
Communities

An Overview

What is Building Caring Communities?

Building Caring Communities is a process that communities can use to become stronger and to improve the well-being of all citizens. It identifies the things that make communities and individuals strong and encourages communities to focus on factors that promote health and well-being.

How Will Communities Benefit?

Building Caring Communities has the potential to:

- Improve the physical and psychological well-being of individuals and of the community as a whole.

- Create a caring community with stronger connections among its members, a greater sense of belonging for citizens and a more supportive environment.

- Give communities and individuals a sense of control over some of the factors that affect health and well-being.

- Enhance community leadership skills. The process gives people experience in leading meetings, speaking in public and similar skills that benefit both individuals and communities as a whole.

- Reduce costs because fewer people will be unhealthy.

Building Caring Communities is about keeping people healthy and connected to each other. It's about creating a strong community so problems don't develop.

What Are the Basic Principles of Building Caring Communities?

Four basic principles underlie Building Caring Communities. These principles are:

- **Prevention** – Promoting health and well-being and preventing problems leads to stronger communities and better quality of life for individuals.

- **Determinants of health** – Our health and well-being are affected by many factors in the physical and social environment. Some of these factors are things that communities can influence. Our health and well-being are also affected by factors that are unique to us as individuals.

- **A strength-based approach** – It is more productive to recognize and build upon the strengths of a community than to focus on deficits.

- **A community-based approach** – A community-based approach means that all citizens are part of the process. It means that the community as a whole and that citizens individually and collectively have ownership for strengthening their community and for decision-making

Why is Prevention Important?

Building Caring Communities is a new way of looking at communities. The traditional way of looking at communities is to do a needs assessment, to identify all of a community's problems, deficits and weaknesses, to list things that need to be fixed, and to focus on solving problems.

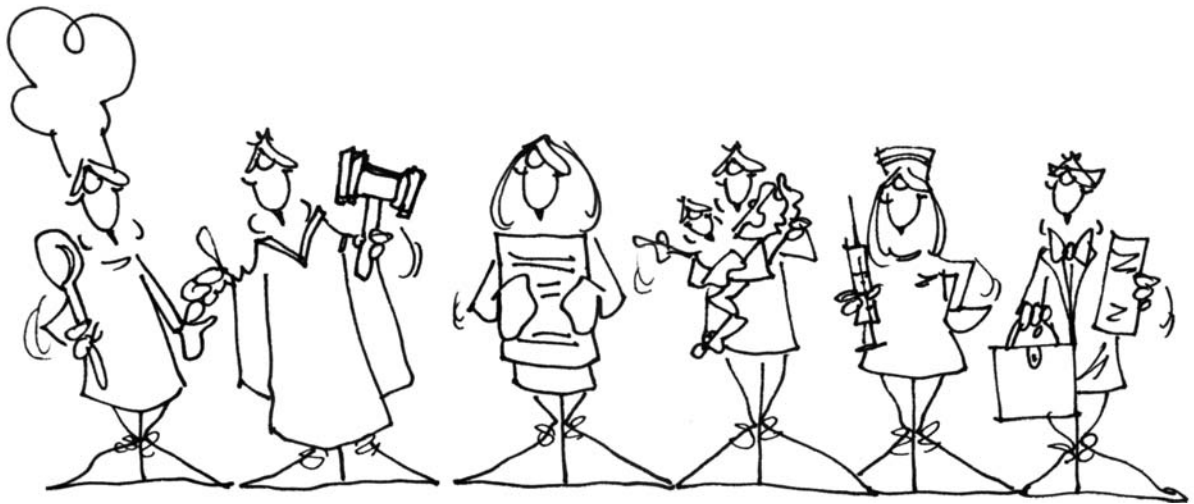Building Caring Communities takes the opposite approach. It identifies the things that make communities and individuals strong and encourages communities to emphasize factors that promote health and well-being. It takes a preventative approach and focuses on ensuring that problems do not occur. Preventing problems makes life better for communities and for the individuals who live in those communities.

What Are the Determinants of Health?

Our health and well-being are affected by many factors in the physical and social world as well as by factors that are unique to us as individuals. Some of these determinants of health can be influenced by community action.

Social World	
Income and Social Status	These two factors may be the most important determinants of health.
Social Support Networks	Strong relationships with friends, family and neighbours seem to act as a buffer against health problems.
Education	Higher levels of education are related to better health.
Employment and Working Conditions	People who work in safe environments, enjoy their work and have control over their work circumstances tend to have better health.
Social Environments	Strong social networks within a community, region, province or country promote health. Social networks are reflected in the way that people participate in community life and share resources.
Healthy Child Development	Good prenatal care and good physical and psychological nurturing in the first few years of life lay a foundation for a lifetime of good health.
Health Services	Both the quality of health services and individuals' access to those services are important.
Physical World	
Physical Environments	Our physical environment includes: • The quality of the air we breath and the water we drink. • Neighbourhoods that are free of safety hazards and violence. • The quality of housing available to all citizens.

The Individual	
Personal Health Practices and Coping Skills	Eating lots of fruits and vegetables, exercising regularly and not smoking are personal health practices that promote health. Coping skills can contribute to good health. Coping skills include the ability to handle life's ups and downs and to get along with others.
Biology and Genetic Endowment	Some people are genetically predisposed to certain health problems. However, a positive environment and good personal health practices can sometimes offset a predisposition to specific health problems.
Gender	Women and men have different roles in society which can influence health. For example, they tend to work in different jobs and have different levels of income. Men and women experience different health problems to a certain extent, and the health care system sometimes treats men and women differently.
Culture	Cultural groups that are marginalized tend to have poorer health. Also, some cultural groups have a predisposition to certain health conditions.

Why the Focus on Community Strengths?

Every community and every individual has strengths and assets.

Living a productive life as an individual and being a strong and caring community depends upon whether those strengths are used, developed and strengthened. Individuals and communities whose gifts are recognized and valued feel good about themselves, develop a positive view of themselves and keep on growing. The key to successful community building is to identify all the community's strengths and to link them together in ways that multiply their effectiveness.

This approach to community building is quite different from the traditional approach that begins with a needs assessment and emphasizes a community's problems and deficits. Emphasizing problems can create a negative focus.

Emphasizing problems also tends to convince citizens that outside intervention is necessary if the community is to become a better place to live.

A strength-based approach shows communities that they have resources and strengths to rely upon and that they don't need to depend on outside intervention.

A strength-based approach sees the glass as being half-full rather than half-empty.

What is a Community-Based Approach?

People are usually only committed to the decisions they make themselves, thus there is a strong emphasis on community involvement and community decision making in Building Caring Communities. The project describes a basic process for community action, but communities are encouraged to modify and adapt this process to suit their own situation.

What is the Building Caring Communities Process?

The Building Caring Communities process will vary from one community to the next. Usually the process will have seven steps:

1. **Create a planning group** – The planning group consists of a few key people who lead the process.

2. **Involve community members** – Get representatives of different community groups together to explore the idea of Building Caring Communities.

3. **Learn more about your community** – Identifying the community's strengths is important at this stage.

4. **Decide on community action** – This step involves selecting determinants of health and related activities.

5. **Plan activities** –Planning involves deciding who will do what and when, and arranging for resources and facilities.

6. **Implement specific activities** – It may be necessary to modify plans as implementation progresses.

7. **Reflect on your work** – This includes evaluating the effectiveness of the activities you have chosen.

How Can Communities Fund Their Projects?

- Some projects may not need a lot of funding. Some can be accomplished by setting different priorities for existing resources. For example, inspecting a town's water supply and sewage disposal is an important means of ensuring a quality physical environment. In many communities this can be done with existing resources and won't require additional funding.

- When funds are needed, look within the community first. Does the town or city provide social development grants? Does the health district have wellness grants available? Are local service clubs or businesses willing to contribute?

- Businesses and individuals may be willing to donate goods and services in return for public acknowledgement as a sponsor.

- If you apply for grants from the federal or provincial government, the Building Caring Communities Steering Committee can suggest possible grant programs.

- Building Caring Communities is not able to directly fund community projects.

Building Caring Communities
PowerPoint/Overhead Presentation

Note: To deliver this presentation, use script below. Get an electronic copy of the visuals (in full colour for overhead or PowerPoint) from Loraine Thompson (306) 757-3206 or ltisl@sasktel.net. A simpler version suitable for Grades 4 to 9 students and accompanying worksheets is also available from Loraine Thompson.

**Building
Caring Communities**

Building Caring Communities is a process that communities can use to become stronger and to improve the well-being of all citizens.

Partners

➢ **Assiniboine Valley Health District**

➢ **City of Yorkton**

➢ **East Central Health District**

➢ **Kamsack School Division**

➢ **Metis Nation of Saskatchewan**

➢ **North Valley Health District**

➢ **Parkland Regional College**

➢ **Southeast Regional Intersectional Committee**

➢ **Yorkton Tribal Council**

Building Caring Communities is a joint project of several partners in southeast Saskatchewan.

- Assiniboine Valley Health District
- City of Yorkton
- East Central Health District
- Kamsack School Division
- Métis Nation of Saskatchewan
- North Valley Health District
- Parkland Regional College
- Southeast Regional Intersectoral Committee
- Yorkton Tribal Council

Building Caring Communities

Looks at factors that make individuals and communities strong and healthy

Building Caring Communities is a new way of looking at communities. The traditional way of looking at communities is to do a needs assessment, to identify all of a community's problems, deficits and weaknesses, to list things that need to be fixed. But Building Caring Communities takes the opposite approach.

Building Caring Communities has the potential to:

➤ **Improve the well-being of individuals and community**

➤ **Create a more caring community**

➤ **Give communities a sense of control over factors that affect health and well-being**

➤ **Enhance community leadership skills**

➤ **Reduce costs because fewer people will be unhealthy**

It identifies the factors that make communities and individuals healthy and strong and encourages communities to focus on the factors that promote health and well-being.

Building Caring Communities has the potential to:

- Improve physical and psychological well-being of individuals and of the community as a whole.

- Create a more caring community, with stronger connections among its members, a greater sense of belonging for citizens and a more supportive environment.

- Give communities and individuals a sense of control over some of the factors that affect health and well-being.

- Enhance community leadership skills. Local citizens will get experience leading meetings, involving community, and writing information materials. These skills benefit the individual and the community as a whole.

- Reduce costs because fewer people will be unhealthy.
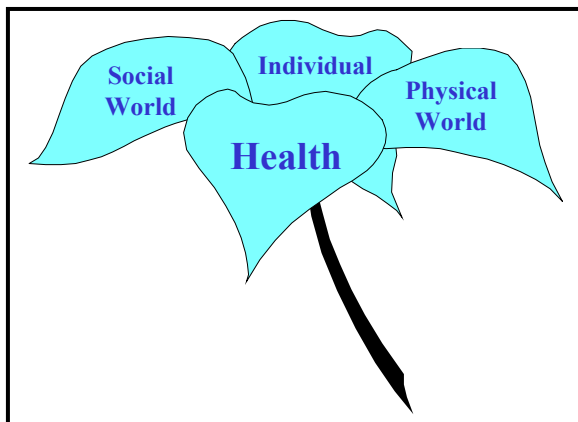
Our physical, emotional and psychological well-being are affected by a variety of factors in the physical and social world. Our health is also affected by factors unique to us as individuals.

Building Caring Communities

is about keeping people healthy and connected to each other. It's about creating strong communities so that problems don't develop.

Building Caring Communities is about keeping people healthy and connected to each other. It's about creating strong communities so that problems don't develop.

Determinants of Health

Our well-being is affected by the determinants of health. Communities can influence many of these determinants.

Our health is determined by many factors outside the health care system. These factors are called the determinants of health. Many of these determinants are things that communities can influence.

The determinants of health can be grouped into three categories: Determinants in the social world, determinants in the physical world and determinants that are within the individual.

Social World
- ➤ **Income and Social Status**
- ➤ **Social Support Networks**
- ➤ **Education**
- ➤ **Employment and Working Conditions**
- ➤ **Social Environments**
- ➤ **Healthy Child Development**
- ➤ **Health Services**

First, I'll talk about determinants in the social world.

Social World

Income and Social Status

May be the most important determinant of health.

- **Income and Social Status** – There is strong and growing evidence that higher social and economic status is associated with better health. In fact, these two factors seem to be the most important determinants of health. Communities that focus on income and social status often create jobs or support local businesses to create jobs. Sometimes federal and provincial money is available for this purpose.

Social Support Networks

Connections with family, friends and neighbours promote good health.

- **Social Support Networks** – Support from families, friends and communities is associated with better health. The satisfaction and sense of belonging that individuals get from social relationships seem to act as a buffer against health problems. There are things that communities can do to promote social support networks. For example, they can organize activities that promote socializing. These include a flower planting day at the local park, community potluck suppers and picnics, open-air street concerts in summer, farmers' markets. Transportation is another aspect of social support networks. Communities can promote social support among low income and elderly people by focusing on public transportation for these groups.

Education

People with more education tend to have better health.

- **Education** – Education is closely tied to socio-economic status. It also equips individuals with problem-solving skills and gives them a sense of control over their lives. Programs that encourage all students to stay in school until they complete Grade 12 are an important part of education. There are other measures that communities can take too. For example, family literacy programs so that parents and children can improve their reading skills together, and literacy and computer training for seniors.

Employment and Working Conditions

➢ **Safe workplace**

➢ **Some control over work**

➢ **Enjoyable work**

- **Employment and Working Conditions** – Unemployment, underemployment, stressful or unsafe work are associated with poorer health. People who have control over their work circumstances and enjoy their work tend to have better health. Communities can develop policies that promote healthy workplace environments like smoke-free workplaces. They can encourage health-related programs like noon-hour exercise programs in the workplace.

Communities can also create programs that help preserve the self-respect of people who are laid off or lose their farms.

- **Social Environments** – Social environments refers to the strength of social networks within a community, region, province or country. It is reflected in the way that people participate in community life and share resources. Some ways of sharing resources at the community level include clothing exchanges, community gardens and community kitchens.

Social Environments

Strong social networks in a community, region, province or country promote good health

Healthy Child Development

➢ **Good prenatal care**

➢ **Good physical and emotional nurturing in the first few years of life**

- **Healthy Child Development** – Good prenatal care and good physical and psychological nurturing in the first few years of life lay a foundation for a lifetime of good health. For example, encouraging pregnant women to avoid alcohol and drugs during pregnancy is an important part of healthy child development. Fetal alcohol syndrome (FAS) is 100 percent preventable.

Similarly, encouraging new moms to breastfeed is important for baby's health. However, creating a program is just the first step. Sometimes it is necessary to take the program to the moms rather than expecting them to come to the program. This is particularly the case for pregnant teens and lower-income or rural people without transportation.

Health Services

➢ **Quality health services**

➢ **Access to health services**

- **Health Services** – Health services that prevent and cure disease have an impact on health. Accessibility of health services is as important as their quality. It is important that everyone in the community can get to the well-baby clinic, the doctor or the hospital when necessary. Sometimes lack of transportation is a barrier to health care.

Physical World

Some of the factors that determine our health are in the physical world.

Physical World

➢ **Physical environments**
- **air and water quality**
- **safe communities**
- **adequate housing**

Our physical environments are important determinants of health.

- The quality of the air we breath and the water we drink affects our health. Most of us take clean water for granted, but recent events in North Battleford and Walkerton Ontario shows us what can happen when the water supply isn't reliable. It is often said that the most important health measure any community can take is not building hospitals, but rather ensuring a clean water supply and adequate sewage disposal.

- The safety of our neighbourhoods and communities is an important part of the physical environment as well. Communities that are free of violence and free of safety hazards like broken glass, unfenced pools of water and the like are healthier places to live. Communities can become more caring by cleaning up neighbourhood safety hazards. They can promote well-being by taking steps to reduce violence, for example, recreation programs that keep youth out of trouble, programs to reduce the alcohol and drug use that often contribute to violence, and neighbourhood watch programs.

- Housing is an important part of the physical environment. Rundown and overcrowded housing is associated with higher rates of illness and infection. Anything that communities can do to ensure that all citizens have affordable, adequate housing will make the community stronger and promote health.

The Individual

➢ **Personal health practices and coping skills**

➢ **Biology and genetic endowment**

➢ **Gender**

➢ **Culture**

The Individual

Four of the determinants of health are related to us as individuals. Some of these are within our control and some are not.

Personal Health Practices and Coping Skills

➢ **Healthy diet**

➢ **Exercise**

➢ **Not smoking**

➢ **Coping with life's ups and downs**

- **Personal Health Practices and Coping Skills** – There are things that individuals can do to look after their health. Eating lots of fruit and vegetables, regular moderate exercise, and avoiding smoking are associated with good health. These are all personal choices, but there are things that communities can do to make it easier for individuals to make healthy choices. If there is a safe, well-lit walking path and if walkers gather at set times of the day, regular exercise and socializing become easier. If the menu at the rink features healthy choices like chili and vegetable soup, rather than fries and hot dogs, it becomes easier to make healthy food choices.

Biology and Genetic Endowment

Sometimes a positive environment and taking good care of yourself can offset a genetic predisposition to a certain health problem

- **Biology and Genetic Endowment** – You may be born with a genetic heritage which may predispose you to certain health problems. However, a predisposition toward a certain condition doesn't mean you will automatically get that condition. There is a complicated interaction between biology, the environment and personal health practices. Living in a positive environment and taking good care of yourself can sometimes offset a genetic predisposition to a certain condition.

Gender

To a certain extent men and women experience different health problems

- **Gender** – To a certain extent, men and women experience different health problems. Men experience more unintentional injuries like accidents on the job, cancer and suicide than women. Women experience more depression, stress overload, chronic conditions such as arthritis and allergies and injuries due to family violence. These differences are partly due to biological differences and partly due to the different expectations that society has for women and men.

Communities can offer different kinds of supports to women and men in order to promote good health in both genders.

Culture

➢ **Marginalized cultural groups have poorer health**

➢ **Some cultural groups have a predisposition for a certain health problem**

- **Culture** – Cultural groups that are marginalized tend to have poorer health. Here in Canada, Aboriginal people have higher infant mortality and more diabetes, heart disease, cancer and high blood pressure than the population in general. As well, a person's cultural background can mean a predisposition to certain conditions. For example, women of northern European and Asian ancestry have a greater disposition to osteoporosis than women of many other cultural backgrounds.

Most communities that become stronger by focussing on the determinants of health, select two or three to work on, because this is a manageable number.

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Community Strengths

➢ **Strength in people**

➢ **Strength in the way people work together**

➢ **Strength in community facilities**

➢ **Strength in community services**

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Community Strengths

All communities have strengths that they can apply to the process of building a caring community. There are four different kinds of community strengths.

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Strength in People

For example, seniors with time and energy to give, youth with enthusiasm

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- **Strengths in people** – for example, seniors with time and energy to give, or youth with lots of enthusiasm. When a community has strengths in people, there are individuals and groups who might be willing to work with their neighbours to plan and implement programs.

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Strength in the Way People Work Together

A history of good working relationships

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- **Strengths in the way people work together** – In your community you might have a history of working together, or there might be a strong relationship between the town and the surrounding rural area or the farmers in the community might be well organized to speak about issues that concern them. Communities with strength in the way people work together can base new activities on the relationships that are already established.

Strength in Community Facilities

For example, a big park, extra space in a school or public building

- **Strengths in community facilities** – You might have a good curling or skating rink, a big school gym, a lovely park. These facilities can provide locations for community activities.

Strength in Community Services

Groups and organizations that work for community well-being

- **Strengths in community services** – In your community you might have a newspaper or radio station that does a good job of reporting community activities, or service clubs that take a strong role in community life or a Chamber of Commerce that is a real booster for the community. These community services can play an important role in building a caring community.

What are some of the strengths in your community? I invite you to pause for a moment now and identify some of the strengths of your community. I suggest that we go around the table and ask the people from this community to identify one strength they recognize.

The Caring Community Process

> **Building Caring Communities Process**
>
> ➢ **Involve community members**
> ➢ **Identify one or more determinants of health as a priority**
> ➢ **Plan activities**
> ➢**Implement and evaluate activities**

As I mentioned at the beginning, Building Caring Communities is a process. And the process is almost as important as the outcomes. When people participate in making their community a better place to live, they gain a sense of control over their lives and have many opportunities to build relationships with others in the community.

This process will vary from one community to another, but will probably have the following steps:

- Involve as many community members as possible in planning. Pay special attention to people that may be hard to reach like shut-ins, seniors, moms with young children and people without cars.

- Identify one or more of the determinants of health as a priority.

- Plan activities that will strengthen your community by building on one or more of the determinants of health.

- Implement and evaluate the activities.

In this project, responsibility for decision-making and actions rests with the community. Building Caring Communities is a process – a process built around community participation. The Building Caring Communities Steering Committee is here to provide a structure and a framework, but all decisions will be made by you and other members of the community. People are usually only committed to decisions they help make – thus the emphasis on community involvement and community decision-making in this project.

> **Building Caring Communities**
>
>

Now I invite your questions and discussion about Building Caring Communities.

Strengths Relating to Community Structure – Worksheet

Use to summarize your community's strengths.

Strengths in People	
Strengths in the Way People Work Together	
Strengths in Community Facilities	
Strengths in Community Services	

Strengths Relating to Determinants of Health – Worksheet

Use to summarize your community's strengths in Step 3.

Social World	
Income and Social Status	
Social Support Networks	
Education	
Employment and Working Conditions	
Social Environments	
Healthy Child Development	
Health Services	

Strengths Relating to Determinants of
Health – Worksheet (Continued)

Physical World	
Physical Environments	

The Individual	
Personal Health Practices and Coping Skills	
Biology and Genetic Endowment	
Gender	
Culture	

Work Plan – Worksheet

Use to develop a work plan for each activity you decide to undertake.

Determinant of Health				
Goal:				
Activity:				
Community Strengths:				
Overview:				
Task	**Who Will Do It?**	**Facilities/Equipment/ Supplies Needed**	**Cost**	**Timelines**

Evaluation Plan – Worksheet

Use to make an evaluation plan for each activity you undertake.

Goal	
Evaluation Questions	
Data Collection	