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Project Proposal

Community Health Advocate Program

For Consideration by:

Community Health Innovation Fund
Vancouver/Richmond Health Board
3rd Floor, 1060 West 8th Ave.
Vancouver, BC V6H 1C4

Submitted by:

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Community Health Innovation Fund
Vancouver/Richmond Health Board
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Vancouver, BC V6H 1C4

Dear Selection Committee,

Please find enclosed a proposal for a 'Community Health Advocate Program'.

This proposal is based on the assumption that the violence that women experience in the health care system is no more or less than violence they experience at home, in the street and at work.

While the awareness around family violence has dramatically increased over the last 5 years, there is still little awareness or acknowledgment of the direct abuse women suffer at the hands of their health care practitioners. The health care system reflects society at large and we as a society continue to turn a blind eye to its continued direct & indirect violence against women.

Sexual abuse, castration, induced drug addiction, mental abuse, unnecessary excised organs and emotional abuse is violence. Yes, the health care system is trying to change, yet daily women are being placed situations where they are emotionally, mentally & physically vulnerable; where they are expected to - no required to! - hand over all of their power to individuals who are, as we all are, products of a society that does not value women's lived experience. Society as a whole does not enable women to take more responsibility for their health, yet places it and their family's health, squarely at their feet.

The lack of action around these issues sanctions this violence and reinforces the values & practices that it springs from.

We hope that Vancouver/Richmond Health Board will join the Ministry of Women's Equality, the Centre of Excellence for Women's Health and the Vancouver Women's Health Collective in sponsoring this pilot project which is designed to systematically raise the awareness around the violence women experience from the health care system and to empower women to take steps to prevent the manifestation of this violence in their own lives.

In health,

Lorna Ketler
Administrator

Title:

Community Health Advocate Program

Project Objectives:

The Women's Health Information Network is a project of the Vancouver Women's Health Collective. This project was developed in conjunction with Ministry of Health, Ministry of Women's Equality, Centre of Excellence for Women's Health and the women's health advocacy community. The Women's Health Information Network provides both accessible health information and the means to build community-specific and province-wide networks. Each of the components of the system is based on the model of health information delivery and advocacy work for which the Vancouver Women's Health Collective is already well known. The computerized information aspect of the system is a tool designed to work with a network of community health advocates in the same manner that our information centre now works with our health help-line workers.

The Community Health Advocate aspect of the Women's Health Information Network is designed to work at the local level. Women will be trained to use community specific health issues and information as community development tool.

The overall goal of this program is to provide the women of the Vancouver/Richmond region with a consistent means to deal with the systemic violence they may experience in the health care system.

The following program objectives are cross-referenced with both Vancouver/Richmond Health Board goals and the prioritized issues of the Population Health Advisory Committees.

The following program goals correspond to the V/RHB Goal #1:

Promote and advocate improvements in the broader determinants of health.

1. to empower women to take steps to prevent the manifestation of this violence in their own lives (1.1)

Outcome measure(s):

- increased number of women from the piloted communities accessing community services that specifically deal with violence against women

2. systematically raise awareness of the direct violence women experience from the health care system (1.1)

Outcome measure(s):

- holding 2 community-specific workshops for each identified community around the manifestations of violence in the health care system

3. document the region-wide incidence of violence against women in the health care system (1.2)

Outcome measure(s):

- assessed by the Community Health Advocates through a monthly evaluation form, which enables them to collate and categorize the experiences of the women they have dealt with that month. This information will be used by researchers, policy makers and incorporated into educational work.

4. build on and strengthen resources that already exist, such as women's centres, community centres, health units and community organizations (1.2)

Outcome measure(s):

- evaluating the success of Community Health Advocate's in working out of these facilities based on the ease of integration and ongoing access to the presenting population

Goals #1-4 also address priorities set by the following PHACs:

Women's Advisory Committee # 2: Violence against women

The following project goals correspond to the V/RHB Goal #5:

Ensure greater public participation and responsibility in the health system

5. to promote a healthy community by using a community development model of advocacy(5.1)

Outcome measure(s):

- assessing the increased input into community health plans by the individuals or groups of women that come into contact with the Community Health Advocates

6. create an active network of Community Health Advocate to directly interact with the health care system – Population Health Advisory Committees, Vancouver/Richmond Health Board, Community Health Committees – to advocate for their communities health issues(5.2)

Outcome measure(s):

- bi-monthly meetings of Community Health Advocates from all communities will facilitate the of support of each others work and share the means of increasing community involvement around generating creative local solutions to local problems

Goals # 5 & 6 also address priorities set by the following PHACs:

Women's Advisory Committee #4: Participation in Health

The following project goals correspond to the V/RHB Goal #6:

Promote greater choice and control by individuals using the health care system

7. support women in their dealings with the health care system through a variety of advocacy roles(6.6)

Outcome measure(s):

- having at least 9 Community Health Advocate trained and working in the community at the end of the pilot

8. to provide consistent health care information around community specified health issues in a format that is community driven(6.3)

Outcome measure(s):

- produce a comprehensive Community Health Advocate training manual in plain English, covering the following topics:
 - baseline information regarding access to the health care system – i.e. MSP - what is covered what is not
 - common reproduction health issues
 - patients rights in the system
 - recourse for actions around abuse within the system
- the number of requests for information to the Vancouver Women's Health Collective by the Community Health Advocates for issue specific material to be translated

Goals # 7 & 8 also address priorities set by the following PHACs:

Women's Advisory Committee #5: Medicalization of Women's Lives

The following project goals correspond to the V/RHB Goal #7:

Respect, recognize and support health service providers as a vital force in contributing to the improvements in the health care system.

9. by participating in research with the Centre of Excellence for Women's Health, we can help health care workers and women to work together to develop a system that is respectful of both of their needs(7.2)

Outcome measure(s):

- at least one research study linking women with health care workers to develop 'better practices' around the issue of power imbalances between women and health practitioners

10. publicize methods to deal with these power imbalances to prevent the direct violence women experience from health practitioners and empower women and health practitioners to adopt these 'better practices'(7.3,7.4)

Outcome measure(s):

- 2 day long workshops with health practitioners and women consumers around dealing with these issues

Goals #9 & 10 also address priorities set by the following PHACs:

Women's Advisory Committee #3: Access to Health Services

Project Description:

The Community Health Advocate program is part of the province-wide Women's Health Information Network. The Women's Health Information Network has 2 components - computerized databases and community health advocates. The databases are designed to be user-friendly and will be accessible to anyone at one or all of the following places: women's centres, community health centres, community centres and public health units (depending on a community's need and resources). These sites reflect the



Women's Health Information Network's underlying philosophy of integration with the community services that already exist. It should be a tool that these services can use, not a stand-alone service. The maintenance and updating of the databases will be the responsibility of the VWHC, and funding will be accessed through Ministry of Health provincially and the BC Centre of Excellence for Women's Health.

We are proposing to use the Vancouver/Richmond region as the pilot for the Community Health Advocate program. The Community Health Advocates will work out of these centres and use the databases to help women make better health care choices. The Community Health Advocate program will create a train the trainer course sponsored by the Vancouver Women's Health Collective. After being trained the Community Health Advocates will be mentored over 3 months around their work in the community.

Activity plan & timeline

Phase 1 Development and promotion of program

- develop community advocacy steering committee consisting of the participating organizations and communities
- manual development - create a comprehensive training manual that can be used by communities to train health advocates. It will be written & designed to allow communities to abstract information into pamphlet or fact sheet format for distribution and/or translation.
- design workshop format
- design implementation and evaluation plan to meet outlined objectives

Phase 2 - training

- The training will be 80 hrs of direct instruction by the trainers, to be followed by a 3-month community apprenticeship.
- The trainers will act as support for the health advocates during this three month training period - meeting with them every 2 weeks to debrief and update & exchange information.

Phase 3 - training evaluation

- evaluated by community members (health practitioners, organizations, individuals) & community health advocates around the following:
 - training - effectiveness in preparing advocates for work in community
 - apprenticeship - effectiveness of WHIN & support network in community
 - support from community to develop community specific advocacy training programs

Phase 4 - implementation

Phase 5 - evaluation

Health Needs & Community Capacity:

In the fall of 1992, the VWHC received a grant from the Ministry of Health to explore the development of a computerized women's health information network for BC. During the next 2 years, two separate studies were conducted. A province-wide needs assessment of organizations (based on survey & focus groups methodology) with regards to the usefulness and expectations of a computerized health information system, resulted in a list of guiding principals for the content and the end-user requirements of WHIN. In 1994, a study of the need for community health care advocates¹ (survey & focus groups methodology) has defined both the advocacy-specific contents of the database and the role of the community health advocate.

¹Is There A Need for A Community Based Health Advocate? A report by the Vancouver Women's Health Collective for the Ministry of Social Services and Housing, 1994



The recommendations from the 1993 province-wide Women's Health Conference², the tri-city study on Women Finding Health Information³ and, most recently, the consultation report by the BC Women's Hospital⁴ strengthened the VWHC's decision to expand upon its existing programs through a system such as the Women's Health Information Network. These studies speak to the need for 1) accessible information about issue specific health concerns and how the health care system works, 2) a central clearinghouse for information to reduce waste of resources, and 3) a system of community health advocates.

The Vancouver Women's Health Collective has conducted three separate policy and priorities studies in the Vancouver/Richmond region. The Interim Regional Health Board funded the first. It consisted of 11 community specific focus groups, which discussed and documented what they felt were the present barriers to being healthy; services they wanted changed and recommendations for action. This information was further developed at the women's policy recommendation forum, which generated a finally report 'Women's Health Forum Document'⁵ for submission to the Interim Regional Health Board. This focus groups & the final document speak to the need for Community Health Advocates. The Ministry of Health Women's Health Bureau funded a study⁶ to enable women of the downtown eastside to prioritize their issues and again, Community Health Advocates were seen as a necessity for the healthy community.

Effects

The Community Health Advocate Program will accomplish it's overall goal to provide the women of the Vancouver/Richmond region with a consistent means to deal with the systemic violence they may experience in the health care system. We expect it to work because given our 25 year experience of working with women around violence in the health care system, we have found that by slowly raising a woman's awareness that she has the right to be dealt with in an appropriate manner – be listened to, not to be physically, emotionally or sexually abused, to be given a wide range of choice about how to deal with her health care concerns – a woman will become a better health care consumer. She will make better health care choices and be more disposed to take active responsibility for her own health.

The effects on other services will vary – visits to health practitioners will be more focused, informal support systems will be fostered and demands on those agencies dealing with governing ethical practices may increase. Issues of violence in other aspects of women lives will be highlighted and encouraged to be acted upon, so those services dealing with violence may also see a rise in clientele.

Appropriateness

New Directions has continually stated a concern for prevention and moving health care into the community. While the development of the Women's Health Bureau, increased funding of the BC Women's Hospital, and collaboration with the Federal Government on the Centre of Excellence for Women's Health demonstrate that the Ministry of Health is making necessary strides towards dealing with the most pressing issues concerning women, nowhere does the current system directly help women become empowered to deal with

²Women's Health Conference: Moderators Report; Ministry of Health and Ministry Responsible for Seniors, 1993

³Finding Health Information: Women's Experience; Marion Crook for the Port Coquitlam Area Women's Centre Society, 1994

⁴The Challenge Ahead for Women's Health, BC Women's Community Consultation Report; Consultation Working Group, Sept. 1995

⁵Women's Health Forum Document, Revised by the Health Forum Document Committee, June 1994

⁶A Place to Start: Women's Health Care Priorities in the Downtown Eastside, Core Women Care, 1995

the violence the system perpetuates. The program that we are proposing will prevent women from being brutalized at the hands of the health care system.

It should be noted that, while the Ministry of Women's Equality, through its funding and inter-ministerial collaborations, has increased the access women have to programming that helps them deal with the family, legal, and street violence (i.e. 'Stopping the Violence'), there is no funding regionally, provincially or federally that supports programs that would systematically deal with the violence women experience in the health care system. This violence is hardly even recognized as an issue. In BC, no organizations or government-funded programs except the VWHC Women's Health Information Centre systematically deal with this issue. Over the last 25 years, we have been the only consistent voice that addresses this problem. Each year, we get thousands of calls from women needing help, and we have no funding to develop the programming needed to address these issues in a comprehensive way.

The herstory of the VWHC speaks to why we would be an appropriate sponsor for this program. The strength of our work has always been the passion of our volunteer collective members. For 25 years, our volunteer collective members have given freely of their time and expertise to help women help themselves. For 25 years, our volunteer collective members have been researching the kinds of health information women need. Through educational programs, publications and workshops, direct advocacy and lobby work, our health information resource centre, specific research projects, mail order service and our health help line, we strive to provide women with access to health. The Community Health Advocate Program is a natural continuation of this work.

By partnering with the Ministry of Health, Ministry of Women's Equality, Centre of Excellence for Women's Health and Vancouver/Richmond Health Board the Vancouver Women's Health Collective is bringing together the necessary aspects needed to be developed if this issue is to be properly addressed.

Acceptability

People would say that the Vancouver/Richmond Health Board should pilot this program because it is needed. The selected quotes from our letters of support (appendix B) demonstrate the high level of acceptability of the Women's Health Information Network and the Community Health Advocate program.

Economy

This is the best solution because as a community development model of advocacy, it draws on the volunteer sector to mobilize and create change from a natural place of self-empowerment. Women have always gathered to exchange their stories and this project facilitate and structures that process in a natural way that are specific to that community. There is no creation of overhead costs as the Community Health Advocates will be working out of already existing organizations. The impact on these organizations will be to bring more people through doors that are already opened and willing to help. It will help these organizations to integrate their services with that of the health care system facilitating action around the broad determinants of health. We estimate that each Community Health Advocate will donate over 260-300 hrs/yr. to her community in the form of one to one advocacy, groups discussion, work on community health plans and in ongoing training. The Vancouver/Richmond Health Board will spend ~ \$20,000 and in return the Vancouver/Richmond region will become safer place for women.

Feasibility

We already have 8 community organizations willing to house the project and members from these communities. The organizations are:

Kits Neighborhood House 2325 West 7 th	736-3588
Vancouver Richmond Mental Health Network 303-1212 West Broadway	733-6186
Mount Pleasant Family Centre 2910 St George Street	872-6757
Mount Pleasant Neighborhood House 800 East Broadway	879-8208
Gay & Lesbian Centre 2-1170 Bute Street	684-5307
Downtown Eastside Women's Centre 44 East Cordova Street	681-8480
South Vancouver Family Place 2295 East 61 st Ave.	325-5213
REACH Community Health Centre 1145 Commercial Dr.	254-1354

The Vancouver Women's Health Collective already has space for holding the workshops & training sessions. Volunteers are waiting to be trained, including street level women and women from the lesbian and Muslim communities.

Support and Consultation

As stated above the Vancouver Women's Health Collective has done extensive research into our community's support for this program. We have 2 secure partners in the development of the Women's Health Information Network.

Minister Sue Hammel, Ministry of Women's Equality met with the Vancouver Women's Health Collective in the summer, verbally agreeing to fund the full time position of Community Health Advocate Coordinator and to explore the possibility of developing ongoing program funding for this position. She sees this as a possibility for directly affecting change for women in the health care system around the issue of violence. She also agreed to work with us to secure funding from the Ministry of Health for the database management side of the program.

The Centre of Excellence for Women's Health, which we are a founding partner of, will be funding the development of the databases and the hardware needed to run the province-wide computer system. We will be working with them around the development of the evaluation of both aspects of the Women's Health Information Network. They believe the Community Health Advocates will act as information feedback system allowing the researchers access to the current health issues for women in various communities. They

also see the Community Health Advocate as an efficient conduit for the dissemination of new information such as up to date research findings.

The Vancouver Women's Health Collective has received a small operating grant from the City of Vancouver for the last 7 years. The City of Vancouver stepped in and helped us not because we fell under their mandate but because they knew we had no other means to fund our centre. As of this year that funding will stop as they believe funding of our organization falls under the mandate of the Vancouver/Richmond Health Board. In another proposal we will be petitioning the health board for the funding for our health information centre which services the Vancouver/Richmond region. In this application we are asking the health board to fund the operating cost of the Community Health Advocate program – development of workshop & training materials, salaries for the pilot workshop training and honorariums for Community Health Advocates.

Administrative Responsibility

Lorna Ketler, Administrator
Vancouver Women's Health Collective*Women's
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Appendix A

Project Budget

1997-98

Community Health Advocates

Community Health Advocate workshop development, production & evaluation 1 contract curriculum designer @ 100 hrs x \$25/hr manual design & production	2,500 3,500	Vancouver/Richmond Health Board
Community Health Advocate training 2 contract trainers @ 300 hrs x \$18/hr honorariums for Community Health Advocate2 @ 250/training x 9	10,800 2,250	Vancouver/Richmond Health Board
salary & benefits for full time Community Health Advocate Program Coordinator @ 38,500	38,500	Ministry of Women's Equality
working with selected women's centres to educate community health councils and regional health councils about need for the Community Health Advocate Program	10,000	Ministry of Women's Equality – Speaking Up and Speaking Out
development of 5-year business plan	3,000	United Way TAP Grant
soft ware development program evaluations	15,000	Centre of Excellence for Women's Health
rent for workshop & training	2,400	Gaming Funds - Vancouver Women's Health Collective
materials & supplies	4,000	VWHC
volunteer hours provided by: VWHC members ~ 1728; steering committees ~ 400; community health advocates (9) training ~ 1440; delivery of advocacy in community ~ 4680		we have both internal and community support for all of these positions in place already
total request from Vancouver/Richmond Health Board	19,050	

1998-99

Community Health Advocates

Community Health Advocate training 2 contract trainers @ 300 hrs x \$18/hr honorariums for Community Health Advocates @ 250/training x 18	10,800 4,500	Vancouver/Richmond Health Board
program promotion	2,000	Vancouver/Richmond Health Board
salary & benefits for full time Community Health Advocate Program Coordinator @ 38,500	38,500	Ministry of Women's Equality
targeted research program evaluations	15,000	Centre of Excellence for Women's Health
rent for workshop & training	2,400	Gaming Funds - Vancouver Women's Health Collective
materials & supplies	4,000	VWHC
volunteer hours provided by: Vancouver Women's Health Collective members ~2604; steering committees ~ 400; community health advocates (27) training ~2880; delivery of advocacy in community ~ 16,200		
total requested from Vancouver/Richmond Health Board	17,300	

Appendix B

quotes from letters of support received to date

BC Coalition for Abortion Clinics, 219-1675 W. 8th Ave , Vancouver, BC V6J 1V2

WHIN would prove to be a valuable resource to BC women, not only providing important health-related information, but that it will put the control of that information in the hands of women.

big sisters of BC Lower Mainland, 34 East 12th Ave, Vancouver, BC V5T 2G5

Women's...right to informed decision-making in regards to their own health care requires that there be a way for them to find current information. Your proposal to use available technology to create an accessible tool...is most welcome and necessary.

The Aurora Centre, BC Women's Hospital, 4500 Oak St., Vancouver, BC V6H 3N1

The database will provide a greatly needed resource for women looking for health practitioners who are sensitive to women's needs.

Battered Women's Support Services, PO Box 1098, Postal Stn. A Vancouver, BC V6C 2T1

We believe that the use of feminist community advocates is an integral part of effective service to all women.

Registered Nurses Association of BC, 2855 Arbutus St. Vancouver, BC V6J 1V2

RNABC supports the general policy of women having greater access to health information and support networks to enable them to make informed decisions regarding their health care options and healthstyle choices.

Positive Women's Network, 1107 Seymour St., Vancouver, BC V6B 5S8

An initiative like the WHIN will broaden the choices available to women, strengthening their ability to manage their health care.

REACH Community Health Care, 1145 Commercial Drive, Vancouver BC V5L 3X3

The information that women are given is often confusing and complicated...they face barriers to making sense of the information they receive.. some are unfamiliar with medical jargon...some are ESL...some cannot afford to travel to the VWHC. WHIN offers a solution to all these barriers.

SHEWAY, 455 E. Hastings Street, Vancouver, BC V6A 1P5

The Information Network would allow women to self-educate about their health care need, to research physicians and other health care providers, and to be empowered by this process.

Western Institute for the Deaf and Hard of Hearing, 2125 West 7th Avenue, Van BC V6K 1X9

A clearinghouse of information which can be accessed via computers at women's centres and elsewhere is an ideal tool for women who are Deaf or Hard of Hearing, and who often encounter communication barriers in their search for information.

Equity Office, U.B.C., Room 306, Brock Hall, 1874 East Mall, Vancouver, BC V6T 1Z1

We applaud the availability of these databases in the communities around the province. The more direct and local this information is, the better that women and their families will be served

The Pacific Foundation of the Advancement of Minority Equality/GLC, 1170 Bute Street, Vancouver, BC V6E 1Z8

This plan will serve to empower many women--especially marginalized women to make appropriate decisions for themselves.

Simon Fraser University Women's Centre, AQ 2003, S.F.U., Burnaby, BC V5A 1S6

Real choices can only be made when information on options is available.

Vancouver Richmond Mental Health Network, 109-96 East Broadway, Vancouver, BC V5T 4N9

A project such as yours would be of great help to women seeking alternatives to psychiatry and ways of empowering themselves.

Roxanne Davies, 1118 Wendel Place, North Vancouver, BC V7K 2W1

The government is urging people to practice good health measures, to take an interest in their health and to be wise consumers of limited medical dollars. The addition of a medical information service for women will be of great benefit to the entire medical system.

The Acupuncture Association of British Columbia, 1367 East 41st Avenue, Vancouver, BC V5W 1R7

The inclusion of "community health advocates" in the package would add a further tool for empowering women to manage their own health care.

British Columbia Medical Association, Council on Health Promotion, 115-1665 West Broadway
Vancouver, BC V6J 1V2

Any system that increases a person's knowledge of the health-care options available today will also help that person make more informed choices.

Screening Mammography Program of British Columbia, #414-750 West Broadway, Vancouver,
B.C. V5Z 1H3

The Women's Health Information Network proposal (utilizing electronic means to provide health information) would be timely and beneficial to the women to British Columbia.

End Legislated Poverty, 211-456 West Broadway, Vancouver, BC V5Y 1R3

Access at the community level of the information being supplied through WHIN and, importantly, the assistance of "community health advocates" will help make health care and choices more accessible for women who may otherwise find themselves outside the mainstream, due to income situation.

Vancouver Lesbian Connection, P.O. Box 65951, Station F, Vancouver, BC V5W 5L4

We believe that this project will have many benefits to our community, as lesbians face many barriers to health services such as homophobic reactions as well as outright refusal of service from medical practitioners.

Helping Spirit Lodge Society, 39665 Dumfries Street, Vancouver, BC V5N 5R3

We know it is very important that women know all the options that are available to them in the community in health and other areas affecting their lives. The idea of having 'Community Health Advocates' who will be trained to assist women is an idea that deserves merit.

Elizabeth Bagshaw Women's Clinic, 40-3195 Granville Street, Vancouver, BC V6H 3K2

Wellness and prevention of disease are best achieved when women are empowered with knowledge, skills and resources. The proposal to develop 'Community Health Advocates' to assist and support individuals and groups of women in accessing and utilizing health care is instrumental to making WHIN truly meaningful and effective.

BC Nurses' Union, 100-4529 Canada Way, Burnaby, BC V5G 1H1

The WHIN project proposal is an important resource tool for nurses both as women and as patient/client advocates.

BC Institute on Family Violence, 290-601 W. Cordova St., Vancouver, BC V6B 1G1

We ourselves contributed a computer database of information of family violence resources that will be included in the WHIN resource database.

Avalon Women's Centre, 5957 West Boulevard, Vancouver BC V6M 3X1

With health care systems changing so rapidly, the need for self-education, information and access to support networks is greater than ever.

BC Woman Magazine, 704 Clarkson St., New Westminster, BC V3M 1E2

Given the current government's commitment to furthering women's rights, and to finding cost-effective, user-friendly, community-based health-care options, I think that WHIN would be a wise funding choice.

□