

## Community Health Advocate Project –Goals and Objectives

*(Old Goals and Objectives - as outlined in the 1997 CHA project proposal submission to the Vancouver/Richmond Health Board (V/RHB)*

*Updated Goals and Objectives – based on the current structure of the CHA Project)*

**Old** The overall goal of this project is to provide the women of the Vancouver/Richmond region a consistent means to deal with the systemic violence they may experience in the healthcare system.

**Update (as above - plus)** And to further support this vision throughout the Lower Mainland, as part of the applicable guiding principles, of the funding guidelines set by the Vancouver Foundation. And the overall mission statement of the Foundation.

### **Vancouver Foundation Mission Statement**

The Vancouver Foundation in meeting community needs, provides philanthropic leadership to improve the quality of life for all British Columbians.

### **Applicable Guiding Principles For Funding By The Vancouver Foundation:**

- a. The target market should be involved in the development, implementation and evaluation of the project.
- b. There should be evidence of collaboration with other agencies in the field.
- c. The organization should demonstrate inclusiveness and respect for cultural diversity.

The CHA project serves in three fields of interest of the Vancouver Foundation: Child and Family, Health and Welfare (project focus) and Education. The CHA project goals and objectives support the above mission statement and guiding principles.

### **CHA Project Goals Corresponding To The Vancouver/Richmond Health Board (V/RHB)**

The CHA projects initial goals and objectives corresponded with some of the overall goals of the V/RHB.

### **The following project goals correspond to the V/RHB Goal # 1**

#### **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):**

**Old** increased number of women from the identified\* piloted communities accessing community services that specifically deal with violence against women.

**Update** increased number of women from communities in need accessing community services that specifically deal with violence against women *facilitated through the Patient's Right's workshop, the Information Kit, information sharing occurring within the workshop sessions and women accessing the Vancouver Women's Health Collective (VWHC).*

(\*Identified Communities – Somali, Farsi, South Asian, Latin American, Chinese, Women of Colour, Aboriginal, Women of the Downtown Eastside, Mental Health Consumers, Women with Disabilities, Lesbian, Bisexual, Transgendered Women, Poor Women)

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

**Outcome measure (s):**

**Old** holding 2 community-specific workshops for each identified community's around the manifestation of violence in the healthcare system.

**Update** holding an introductory and follow up community-specific Patient's Rights workshop with each community organization within the lower mainland interested in the Patient's Rights Workshop

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

**Outcome measure(s):**

**Old** 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.

**Update** assessed by the workshop facilitator who documents with permission participant's experiences within the healthcare system shared during the workshop. As well space is provided on the Patients Right's workshop evaluation form for women to share their experiences within the healthcare system. This information is collated and categorized for the evaluation process and funding reports. This information **can** be used by

researches, policy makers and incorporated into the overall educational work of the VWHC.

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

**Outcome measures(s):**

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

**Update** evaluating the success of the Patient's Rights workshop being facilitated from these facilities based on the ease of integration and on-going access to the requesting populations.

**Goals # 1-4 also address priorities set by the following PHAC's:** Women's advisory committee priority #2: Violence against women

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

**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):**

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

**Update** assessing the increased input into community health plans by the organization representatives who meet with the CHA coordinator to plan Patient's Rights workshops in their community as well as during the CHA projects on-going evaluation process.

6. **Old** create an active network of Community Health Advocates 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)

**Updated** participate with the VWHC in community meetings involving Population Health Advisory committees, V/RHB, CHC, to advocate for the CHA's identified communities health issues. As well through the Patient's Rights

workshop work with community organizations to identify health issues within their communities.

**Outcome measure(s):**

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

**Update** including community organization in the CHA evaluation process and in the organizing of Patient's Rights workshops will help facilitate the 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 Priority # 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. **Old:** support women in their dealings with the health care system through a variety of advocacy roles(6.6)

**Update:** support women in their dealings with the health care system through the Patient's Rights workshop and the Information Kit

**Outcome measure(s):**

**Old** Having at least 9 Community Health Advocates trained and working in the community at the end of the pilot

**updated** providing 3 Patient's Rights Workshops per month held at community organizations which support the CHA project goals and objectives.

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

**Outcome measure(s):**

**Old** 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

- Updated** -produce an inclusive Patient's Rights that is tailored to individual communities
- produce a comprehensive Patient's Rights facilitators training manual
  - produce an Information Kit for Patient's Rights participants of updated basic information regarding access to the health care system (using I information from the Community Health Advocates Training Manual)
    - i.e. MSP – what is covered what is not
    - common reproduction health issues (as an addition)
    - patients rights in the system
    - recourse for actions around abuse within the system
- translated Patient's Rights brochure insert

**Goals # 7 & 8 also address priorities set by the following PHACs: Women's Advisory Committee Priority # 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 their needs (7.2)

**Outcome measure(s):**

**Old** 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

**Update same as above**

10. public 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):**

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

**Update** the continues promotion and delivery of the Patient's Rights workshop which helps women give voice to these issues and become educators to their healthcare professionals. The CHA

project works with community organizations working in the area of educating health practitioners on adopting 'better practices'.

**Goals #9 & 10 also address priorities set by the following PHACs: Women's Advisory Committee Priority # 3: Access to Health Services**

**Please offer any comments or suggestions to this updated goals and objectives document.**