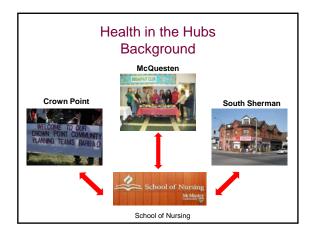


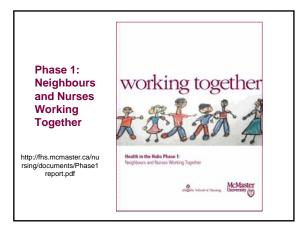
Health in Hubs McMaster Team

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Why Here?

- Communities with a strong or emerging tradition of pride and motivation for action
- Communities that recognize a possibility of positive change in spite of challenges.
- Communities that believe in their own capacity to make a difference in their lives.



Community resident consultants:

- Hired from each LPT funded by the McMaster School of Nursing
- Developed information gathering strategies
- Adjusted language for Phase I survey
- Demonstrated commitment beyond paid role
- Brought considerable knowledge about their neighbourhoods and strong networks to facilitate gathering of opinion



Key Health Issues Identified







Meaning to residents and nurses

Residents desire:

- Access to fresh, healthy, affordable
- foods for their families. Knowledge on preparing nutritious meals



creating jobs in the neighbourhood that are related to food.

Community Health Implication The availability of affordable, nutritious food in LOCAL stores and food markets can promote healthy eating habits especially in priority neighbourhoods that have high rates of obesity/diabetes (Finkelstein, 2008)



Meaning to residents and nurses.

Residents desire:

- Clear sidewalks
- Safe passage over roads or railway crossings

Community Health Implications: Neighbourhoods where you cannot walk, or bicycle have higher rates of diabetes (Glazier & Booth, 2007).









Meaning to residents and nurses

• Residents desire:

- Clean streets

 Mixed housing that conforms to zoning and legal requirements



Community Health Implications: Safe Neighbourhoods encourage walking, interaction and activity. Sedentary lifestyles is a contributing factor to diabetes (Glazier & Booth, 2007).



Neighbourhoods & Health: Why it's important to Nurses ?

 Neighbourhoods that are not walkable and/or do not have access to local stores/markets and/or do not feel safe can have a negative influence on the health of residents leading to chronic health problems including: obesity, heart disease, diabetes, arthritis and some cancers. (Glazier & Booth, 2007).



Moving Forward

- Crown Point: working with neighbourhood planning team on an Action Plan to influence local policy related to Walkability.
- McQuesten: working with neighbourhood planning team to produce a ZINE to engage residents in local issues and build capacity to strengthen the work of local planning team.
- South Sherman: working with neighbourhood planning team to help them use the information gleaned from Phase 2 of the project to become informed on effects of a high profile sporting event on the neighbourhood.

What did we learn?

- Residents have strengths, resources and expertise.
- Neighbourhood research is an engagement process that: achieve trust, is mutually owned, co-evolves, co-produced and makes a long term commitment.
- Uptake by residents in high priority neighbourhoods to improve their chronic health conditions might be best facilitated by nurses first learning about and then acting upon the concerns residents have about the features of their neighbourhoods that are barriers to well being.



What did we learn? (cont'd)

Development of () Health in the Hubs Charter that:



Defines the rules of engagement for partnering with the community.
 Reflects the value of reflective practice for academics when engaging

- Reflects the value of reflective practice for academics when engaging in community development.
 Outlines using a discussion because is unarking towards a shored
- Outlines values and key lessons learned in working towards a shared vision:

"We will build a sustainable, strong, respected campuscommunity partnership that blends the assets of the community and university to help make our neighbourhoods healthy and safe places to live, work, play and raise a family."

Questions?

- Contact re Phase I
 - Dyanne Semogas <u>semogas@mcmaster.ca</u>
 - Steven Rolfe rolfe@mcmaster.ca

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