



CANADIAN  
**NURSES**  
ASSOCIATION

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# **Canadian Nurses Association's Social Justice Work with the Community Health Nurses of Canada**

**Project 1 Report:**

**Assessment of Current CHNC Programs,  
Policies and Products Using the  
CNA Social Justice Gauge**



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# Introduction

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This is the report for project 1 of the Canadian Nurses Association's (CNA's) social justice work with the Community Health Nurses of Canada (CHNC). The overall aim of this work is to increase the comprehension of Canadian nurses working in community health of the concepts of equality, equity and social justice and to increase the applicability of these concepts to their work. The objectives of CNA's social justice work with CHNC are to:

1. Assess current CHNC programs, policies and products for alignment with social justice ideals.
2. Develop educational tools for building the awareness and comprehension of Canadian nurses working in community health of the concepts of equality, equity and social justice.
3. Develop presentation materials about equality, equity, social justice and community health nurses that would be suitable for conferences and other public presentations.
4. Facilitate a deliberative dialogue among members of the partnership about equality, equity, social justice, community health nurses and the role of CHNC and CNA.
5. Develop a list of other potential partners at the provincial, territorial or national level.
6. Draft a longer term work plan related to social justice, Canadian community health nurses, CHNC, CNA and other partners.

The purpose of project 1 is to assess current CHNC programs, policies and products for alignment with the ideals of social justice and equity using the CNA Social Justice Gauge (see Appendix). The following documents or products have been assessed and are included in this report:

- Part 1: CHNC's mission statement, statements of "what we do" and "what we value" and objectives as stated in the CHNC constitution
- Part 2: Bylaws (Articles I—XII)
- Part 3: *Public Health Nursing Discipline Specific Competencies Version 1.0*
- Part 4: *Canadian Community Health Nursing Standards of Practice Document*
- Part 5: Canadian Community Health Nursing Standards of Practice Model
- Part 6: *Canadian Community Health Nursing Standards of Practice (CCHN Standards) Toolkit*

## Part 1: Assessment of CHNC's vision, mission, principal activities and objectives

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### CHNC's mission statement:<sup>1</sup>

“The Community Health Nurses Association of Canada [now known as Community Health Nurses of Canada] as a federation of provincial/territorial community health nurses interest groups provides a unified voice to represent and promote community health nursing and the health of communities.”

### CHNC's “what we do” statement:<sup>2</sup>

“CHNC provides a forum for community health nurses across Canada to share issues of mutual concern and to communicate through meetings and national publications.

Through invited attendance at national conferences and workshops and by participation on national task forces CHNC is able to represent the views of Canadian community health nurses to those outside the specialty of community health nursing.

CHNC identifies and responds to issues of interest and concern which affect all community health nurses across Canada and represents the view of CHNC to CNA.

As an Interest Group of CNA, CHNC is responsible for developing standards of practice of community health nursing in Canada and for promoting the specialty of community health nursing.”

### CHNC's “what we value” statement:<sup>3</sup>

- “CHNAC [now known as CHNC] accepts the World Health Organization definition of health as a resource for everyday living (WHO 1984).
- Primary Health Care, as defined by the World Health Organization, is the vehicle for community health nursing practice (WHO 1978).
- Excellence in community health nursing practice.”

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<sup>1</sup> CHNC's mission is available at <http://www.chnc.ca/community-health-nurses-values-and-mission-statement.cfm>

<sup>2</sup> CHNC's “what we do” statement is available at <http://www.chnc.ca/community-health-nurses-values-and-mission-statement.cfm>.

<sup>3</sup> CHNC's “what we value” statement is available at <http://www.chnc.ca/community-health-nurses-values-and-mission-statement.cfm>.

CHNC's objectives as stated in its constitution:<sup>4</sup>

“The objective[s] for which the Association is founded are:

- a. To promote standards of Community Health Nursing Practice throughout Canada.
- b. To promote quality assurance in Community Health Nursing services.
- c. To provide a forum for Community Health Nurses to communicate more effectively, discuss common concerns, to share knowledge and expertise on a national basis.
- d. To promote research in Community Health Nursing issues.
- e. To promote professional and public awareness of Community Health Nursing Practice.
- f. To encourage members to participate in affairs promoting the public and community well-being.
- g. To make such by-laws as may be deemed necessary and advisable concerning the administration and management of the affairs of the Association, and from time to time to alter and repeal any such by-laws.
- h. To regularly evaluate the Association's Mission, Vision and Values for continued relevance and meaning for the Association and its members.”

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<sup>4</sup> CHNC's constitution is available at <http://www.chnc.ca/community-health-nurses-constitution-bylaws.cfm>.

## Assessment of CHCN’s vision, mission, principal activities and objectives using the CNA Social Justice Gauge – Version 2.0

Canadian Nurses Association Social Justice Gauge – Version 2.0		
CHNC’s vision, mission, principal activities and objectives		
	RECOGNITION	RESPONSIBLE ACTION
<p>1. Does it acknowledge that different individuals or groups occupy different positions of social advantage in society?</p> <p>Yes <input type="checkbox"/></p> <p>No <input checked="" type="checkbox"/> (Not specifically)</p>	<p>CHNC provides “a unified voice to...promote community health nursing and the health of communities”</p> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• does not recognize the existence of sub-populations in communities</li> <li>• does not address equity</li> <li>• does not target vulnerable or marginalized groups, etc.</li> </ul> <p>“CHNC provides a forum for community health nurses...to share issues of mutual concern” and CHNC “identifies and responds to issues of interest and concern which affect all community health nurses” and provides a forum to “discuss common concerns”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• sharing and communication is taking place, which is a good action</li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• assumes issues of mutual concern are key rather than issues of great need that may be important, only in one area or for one group</li> <li>• objectives do not address social justice, health equity or the role of the CHNC in these issues</li> </ul>	<p>CHNC is “...a federation of provincial/territorial community health nurses interest groups”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• representation across the country</li> </ul> <p>“CHNC provides a forum for community health nurses...to communicate through meetings and national publications”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• avenues for communication exist</li> </ul> <p>“Through invited attendance at national conferences and workshops and... participation on national task forces CHNC is able to represent the views of Canadian community health nurses to those outside the specialty”</p> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• does not mention equity in relation to who participates</li> </ul> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• there are avenues for participation and voice</li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• objectives have no specific mention of responsible action toward targeting vulnerable groups or focusing on specific issues of social injustice, inequity or advocacy</li> </ul>
	<p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• no specific mention</li> </ul> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• opportunities exist to highlight this fact in organizational statements (i.e., CHNC already defines health broadly and supports primary health care)</li> </ul>	<p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• no specific actions mentioned</li> </ul> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• opportunities exist to act (i.e., CHNC already has broad communication platforms and is represented at many tables)</li> </ul>

<b>Canadian Nurses Association Social Justice Gauge – Version 2.0</b>		
<b><i>CHNC’s vision, mission, principal activities and objectives</i></b>		
	<b>RECOGNITION</b>	<b>RESPONSIBLE ACTION</b>
	<p>“CHNAC accepts the World Health Organization definition of health as a resource for everyday living”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>recognizes a broad definition of health and its determinants</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>a more specific mention of the determinants of health and health equity is needed</i></li> </ul>	<p>“CHNC is responsible for developing standards of practice”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>this role is being taken and opportunity exists</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>this is not identified as an avenue to promote social justice</i></li> </ul> <p>CHNC supports “Primary Health Care”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>it is a supportive approach for social justice</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>could mention more specifically “health for all” or health equity or both</i></li> </ul> <p>CHNC values “excellence in community health nursing practice”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>opportunity exists if equity and social justice work is considered part of the practice)</i></li> </ul>
	<p>“CHNAC accepts the World Health Organization definition of health as a resource for everyday living”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>recognizes a broad definition of health and its determinants</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>a more specific mention of the determinants of health and health equity is needed</i></li> </ul>	<p>“CHNC is responsible for developing standards of practice”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>this role is being taken and opportunity exists</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>this is not identified as an avenue to promote social justice</i></li> </ul> <p>CHNC supports “Primary Health Care”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>it is a supportive approach for social justice</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>could mention more specifically “health for all” or health equity or both</i></li> </ul> <p>CHNC values “excellence in community health nursing practice”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>opportunity exists if equity and social justice</i></li> </ul>



<b>Canadian Nurses Association Social Justice Gauge – Version 2.0</b>		
<b><i>CHNC’s vision, mission, principal activities and objectives</i></b>		
	<b>RECOGNITION</b>	<b>RESPONSIBLE ACTION</b>
		<i>work is considered part of the practice)</i>
<p>2. Does it acknowledge that unfair differences (inequities) exist in the opportunities and outcomes of different individuals or groups?</p> <p>Yes <input type="checkbox"/></p> <p>No <input checked="" type="checkbox"/> (Not specifically)</p>	<p>“CHNAC accepts the World Health Organization definition of health as a resource for everyday living”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>recognizes a broad definition of health and its determinants</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>a more specific mention of the determinants of health and health equity is needed</i></li> </ul>	<p>“CHNC is responsible for developing standards of practice”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>this role is being taken and opportunity exists</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>this is not identified as an avenue to promote social justice</i></li> </ul> <p>CHNC supports “Primary Health Care”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>it is a supportive approach for social justice</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>could mention more specifically “health for all” or health equity or both</i></li> </ul> <p>CHNC values “excellence in community health nursing practice”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>opportunity exists if equity and social justice work is considered part of the practice)</i></li> </ul>
<p>3. Does it acknowledge root causes of inequities?</p> <p>Yes <input type="checkbox"/></p> <p>No <input checked="" type="checkbox"/> (Not specifically)</p>	<p>“CHNAC accepts the World Health Organization definition of health as a resource for everyday living”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>recognizes a broad definition of health and its determinants</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>a more specific mention of the determinants of health and health equity is needed</i></li> </ul>	<p>“CHNC is responsible for developing standards of practice”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>this role is being taken and opportunity exists</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>this is not identified as an avenue to promote social justice</i></li> </ul> <p>CHNC supports “Primary Health Care”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>it is a supportive approach for social justice</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>could mention more specifically “health for all” or health equity or both</i></li> </ul>

Canadian Nurses Association Social Justice Gauge – Version 2.0		
<i>CHNC’s vision, mission, principal activities and objectives</i>		
	RECOGNITION	RESPONSIBLE ACTION
		CHNC values “excellence in community health nursing practice”  <i>Strength(s):</i> • <i>opportunity exists if equity and social justice work is considered part of the practice)</i>

*Notes:*

1. This table is an abbreviated version of the CNA Social Justice Gauge – Version 2.0 template. See the Appendix for the full version.
2. Direct quotations from the document under assessment are enclosed in quotation marks. The reviewers’ comments are italicized.

*Overall comments:*

CHNC’s vision, mission, stated principal activities and objectives are not clearly aligned with social justice and equity ideals or actions at present. Positively, the CHNC adopts a broad definition of health, supports primary health care, has representation across the country and has many potential avenues for communication and advocacy. It could, however, use these opportunities more effectively to support social justice and equity endeavours. The organization could also more clearly state a commitment to social justice or equity or both in its key guiding statements.

## Part 2: Assessment of Bylaws (Articles I-XII)

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### Bylaws (Articles I-XII)<sup>5</sup>

- ARTICLE I - Membership
- ARTICLE II - Executive Board
- ARTICLE III - Nominations and Elections
- ARTICLE IV - Officers of the Association
- ARTICLE V - Duties of Officers
- ARTICLE VI - Accountability of Executive Board Members
- ARTICLE VII - Support for Affiliated Provincial/Territorial Community Health Nursing Associations/Groups
- ARTICLE VIII - Meetings of all Members of the Association
- ARTICLE IX - Standing Committees
- ARTICLE X - Rules of Order
- ARTICLE XI - By-Law Amendments
- ARTICLE XII - Audit

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<sup>5</sup> CHNC's constitution and a list of all bylaws (articles and sections of articles) are available at <http://www.chnc.ca/community-health-nurses-constitution-bylaws.cfm>.

## Assessment of CHNC’s bylaws using the CNA Social Justice Gauge – Version 2.0

Canadian Nurses Association Social Justice Gauge – Version 2.0		
CHNC’s bylaws		
	RECOGNITION	RESPONSIBLE ACTION
<p>1. Does it acknowledge that different individuals or groups occupy different positions of social advantage in society?</p> <p>Yes <input type="checkbox"/></p> <p>No <input checked="" type="checkbox"/> (Not specifically)</p>	<p><i>No specific mention or acknowledgment of this fact</i></p>	<p>(Membership) “Any student enrolled in an approved or accredited nursing program in Canada is eligible for individual membership”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>there is a specific membership category for students</i></li> </ul> <p>(Membership) “Any registered nurse residing in a province/territory that does not have an established community health nursing [sic] is eligible for individual membership”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>provisions are made for areas of the country that may not have a strong existing infrastructure</i></li> </ul> <p>(Membership) “Individual and affiliate membership fees and student membership fees” are available</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>there is a reduced membership fee for students</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>there is no provision for low-income members, retirees or others who may not be able to pay the regular membership fee</i></li> </ul>
	<p><i>No specific mention or acknowledgement of this fact</i></p>	<p>(Executive Board, Officers of the Association, Duties of Officers) “National Stakeholder Liaison...will act as an ambassador for CHNC at national activities/gatherings and inform the Board of Directors of trends, issues and opportunities relevant to CHNC’s mission and objectives”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>there is a specific position with this role</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>at present this role does not seem to include advocacy or specific activities related to social justice or equity</i></li> </ul> <p>(Executive Board) Board of Directors will include a “Provincial/Territorial representative from each participating Province/Territory”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>national representation</i></li> </ul>

<b>Canadian Nurses Association Social Justice Gauge – Version 2.0</b>		
<b>CHNC's bylaws</b>		
	<b>RECOGNITION</b>	<b>RESPONSIBLE ACTION</b>
		<p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>does not go further and suggest any affirmative action membership strategies</i></li> </ul> <p>(Executive Board) “An executive member, with the exception of the President and President-Elect, may hold a specific maximum of two (2) consecutive terms”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>ensures turnover in executive over time, providing new opportunities</i></li> </ul> <p>(Executive Board, Nominations and Elections) “CHNC Board will issue a call for nominations at least 60 days prior to the date of the Annual General Meeting” and “In provinces/territories without an existing group, the CHNC Board will issue a call for nominations and will hold elections during the Annual General Meeting”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>democratic processes that allow participation even from areas without strong existing infrastructure</i></li> <li>• <i>gives time for potential candidates to organize</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>does not outline any affirmative action strategies, such as recruiting applicants or actively and widely advertising positions</i></li> </ul> <p>(Nominations and Elections) The Nominating Committee will “poll members for suggestions and nominees for the Executive Committee”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>opportunities for input from all members</i></li> </ul> <p>(Duties of Officers) “Provincial/Territorial Representatives are the official liaison between C.H.N.C. and their provincial/territorial Community Health Group or community health nurses in their jurisdiction”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>this communication channel exists</i></li> </ul> <p>(Accountability of Executive Board Members) “Board members who miss 2 consecutive Board meetings without satisfactory reason may...be reviewed by the Board. Notice of termination will be determined by 2/3 majority vote of the Board”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>important to have a clear policy and process about expectations for participation and Board membership</i></li> </ul>

<b>Canadian Nurses Association Social Justice Gauge – Version 2.0</b>		
<b>CHNC's bylaws</b>		
	<b>RECOGNITION</b>	<b>RESPONSIBLE ACTION</b>
		<p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>what is a "satisfactory reason" and who determines this?</i></li> </ul> <p>(Meetings of All Members of the Association) "A meeting shall be held once a year... Notification of the time, place, and agenda are to be sent to all regular members in good standing at least two (2) months in advance"</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>regular meetings and enough notice for members to make arrangements to come</i></li> </ul> <p><i>Area (s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>favours people who live closer to the meeting location and are able to afford the costs of attending</i></li> <li>• <i>does the meeting location change?</i></li> <li>• <i>are there options to participate using technology or other means?</i></li> <li>• <i>are there supports in place for those who might not be able to attend?</i></li> </ul> <p>(Meetings) "The Board of Directors may, whenever they think fit, or shall upon the request made in writing by a minimum of three (3) regular members in good standing, call a Special Meeting"</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>other meetings can be held at the request of members</i></li> </ul>
	<p><i>No specific mention or acknowledgement of this fact.</i></p>	<p>(Membership) "Individual and affiliate membership fees and student membership fees" are available</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>variable membership fees for different groups</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>could have more fee options</i></li> </ul> <p>(Executive Board) "Three members shall constitute a quorum at any meetings of the Board of Directors"</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>important to have a clear policy</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>is this enough people?</i></li> </ul> <p>(Executive Board) "Should a vacancy occur on the Executive Committee, the Board of Directors shall appoint a member to fill the position" and "Should a Provincial/Territorial Representative vacate a position, the community health nursing association of that</p>

<b>Canadian Nurses Association Social Justice Gauge – Version 2.0</b>		
<b>CHNC's bylaws</b>		
	<b>RECOGNITION</b>	<b>RESPONSIBLE ACTION</b>
		<p>province/territory shall appoint a member”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>this is a clear policy</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>may not be democratic; does this ensure fairness in who may be appointed to fill an opening?</i></li> </ul> <p>(Nominations and Elections, Meetings of All Members of the Association) The nominating committee will “carry out an election at the annual general meetings” and “Each Executive Officer, each Provincial/Territorial Representative and the National Stakeholder Liaison member shall have one vote” and “A majority of votes of the Board of Directors members present at any meeting or polled by ballot shall decide any questions”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>democratic processes</i></li> </ul> <p>(Duties of Officers, Audit) “The Secretary/Treasurer shall keep or cause to be kept full and accurate accounts of all financial transactions” and “The accounts shall have an external audit done annually”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>financial aspects well monitored</i></li> </ul> <p>(Accountability of Executive Board Members) “A process will be in place to identify and monitor the accountability of Board members with regards to fulfilling their duties of office”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>statement that the Board must be accountable</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>lack of clarity concerning this process, the people to whom board members are accountable and the consequences if board members fail to fulfill their duties</i></li> </ul> <p>(Supports for Affiliated Provincial/Territorial Community Health Nursing Associations/Groups) “CHNC will provide support to provincial/territorial community health nursing associations/groups”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>support expressed for affiliate groups</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>is support offered equally to all affiliates or on the basis of need?</i></li> </ul>

<b>Canadian Nurses Association Social Justice Gauge – Version 2.0</b>		
<b>CHNC's bylaws</b>		
	<b>RECOGNITION</b>	<b>RESPONSIBLE ACTION</b>
	<p><i>No specific mention or acknowledgement of this fact.</i></p>	<p>(Membership) "Individual and affiliate membership fees and student membership fees" are available</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>variable membership fees for different groups</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>could have more fee options</i></li> </ul> <p>(Executive Board) "Three members shall constitute a quorum at any meetings of the Board of Directors"</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>important to have a clear policy</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>is this enough people?</i></li> </ul> <p>(Executive Board) "Should a vacancy occur on the Executive Committee, the Board of Directors shall appoint a member to fill the position" and "Should a Provincial/Territorial Representative vacate a position, the community health nursing association of that province/territory shall appoint a member"</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>this is a clear policy</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>may not be democratic; does this ensure fairness in who may be appointed to fill an opening?</i></li> </ul> <p>(Nominations and Elections, Meetings of All Members of the Association) The nominating committee will "carry out an election at the annual general meetings" and "Each Executive Officer, each Provincial/Territorial Representative and the National Stakeholder Liaison member shall have one vote" and "A majority of votes of the Board of Directors members present at any meeting or polled by ballot shall decide any questions"</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>democratic processes</i></li> </ul> <p>(Duties of Officers, Audit) "The Secretary/Treasurer shall keep or cause to be kept full and accurate accounts of all financial transactions" and "The accounts shall have an external audit done annually"</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>financial aspects well monitored</i></li> </ul>



<b>Canadian Nurses Association Social Justice Gauge – Version 2.0</b>		
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	<b>RECOGNITION</b>	<b>RESPONSIBLE ACTION</b>
		<p>(Accountability of Executive Board Members) “A process will be in place to identify and monitor the accountability of Board members with regards to fulfilling their duties of office”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>statement that the Board must be accountable</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>lack of clarity concerning this process, the people to whom board members are accountable and the consequences if board members fail to fulfill their duties</i></li> </ul> <p>(Supports for Affiliated Provincial/Territorial Community Health Nursing Associations/Groups) “CHNC will provide support to provincial/territorial community health nursing associations/groups”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>support expressed for affiliate groups</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>is support offered equally to all affiliates or on the basis of need?</i></li> </ul>
<p>2. Does it acknowledge that unfair differences (inequities) exist in the opportunities and outcomes of different individuals or groups?</p> <p>Yes <input type="checkbox"/></p> <p>No <input checked="" type="checkbox"/> (Not specifically)</p>	<p><i>No specific mention or acknowledgement of this fact.</i></p>	<p>(Membership) “Individual and affiliate membership fees and student membership fees” are available</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>variable membership fees for different groups</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>could have more fee options</i></li> </ul> <p>(Executive Board) “Three members shall constitute a quorum at any meetings of the Board of Directors”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>important to have a clear policy</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>is this enough people?</i></li> </ul> <p>(Executive Board) “Should a vacancy occur on the Executive Committee, the Board of Directors shall appoint a member to fill the position” and “Should a Provincial/Territorial Representative vacate a position, the community health nursing association of that province/territory shall appoint a member”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>this is a clear policy</i></li> </ul> <p><i>Area(s) for improvement:</i></p>

<b>Canadian Nurses Association Social Justice Gauge – Version 2.0</b>		
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<p>3. Does it acknowledge root causes of inequities?</p> <p>Yes <input type="checkbox"/></p> <p>No <input checked="" type="checkbox"/> (Not specifically)</p>	<p><i>No specific mention or acknowledgement of this fact.</i></p>	<p>(Membership) “Individual and affiliate membership fees and student membership fees” are available</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>variable membership fees for different groups</i></li> </ul>

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		<p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>could have more fee options</i></li> </ul> <p>(Executive Board) “Three members shall constitute a quorum at any meetings of the Board of Directors”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>important to have a clear policy</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>is this enough people?</i></li> </ul> <p>(Executive Board) “Should a vacancy occur on the Executive Committee, the Board of Directors shall appoint a member to fill the position” and “Should a Provincial/Territorial Representative vacate a position, the community health nursing association of that province/territory shall appoint a member”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>this is a clear policy</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>may not be democratic; does this ensure fairness in who may be appointed to fill an opening?</i></li> </ul> <p>(Nominations and Elections, Meetings of All Members of the Association) The nominating committee will “carry out an election at the annual general meetings” and “Each Executive Officer, each Provincial/Territorial Representative and the National Stakeholder Liaison member shall have one vote” and “A majority of votes of the Board of Directors members present at any meeting or polled by ballot shall decide any questions”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>democratic processes</i></li> </ul> <p>(Duties of Officers, Audit) “The Secretary/Treasurer shall keep or cause to be kept full and accurate accounts of all financial transactions” and “The accounts shall have an external audit done annually”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>financial aspects well monitored</i></li> </ul> <p>(Accountability of Executive Board Members) “A process will be in place to identify and monitor the accountability of Board members with regards to fulfilling their duties of office”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>statement that the Board must be accountable</i></li> </ul>

Canadian Nurses Association Social Justice Gauge – Version 2.0		
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		<p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>lack of clarity concerning this process, the people to whom board members are accountable and the consequences if board members fail to fulfill their duties</i></li> </ul> <p>(Supports for Affiliated Provincial/Territorial Community Health Nursing Associations/Groups) “CHNC will provide support to provincial/territorial community health nursing associations/groups”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>support expressed for affiliate groups</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>is support offered equally to all affiliates or on the basis of need?</i></li> </ul>

*Notes:*

1. This table is an abbreviated version of the CNA Social Justice Gauge – Version 2.0 template. See the Appendix for the full version.
2. Direct quotations from the document under assessment are enclosed in quotation marks. The reviewers' comments are italicized.

*Overall comments:*

Although there is no specific mention or acknowledgement of social justice or equity in the bylaws, there are many examples of organizational policies that are supportive of social justice and equity. Equity, fairness or justice could be mentioned explicitly and some of the existing policies could be adapted and clarified to ensure better support of social justice ideals. A few items have been highlighted where new policies could be added.

## **Part 3: Assessment of the *Public Health Nursing Discipline Specific Competencies Version 1.0*<sup>6</sup>**

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The introduction to the *Public Health Nursing Discipline Specific Competencies Version 1.0* states the following: “The need to further define discipline specific competencies for public health nurses was identified as a priority by the Community Health Nurses Association of Canada (CHNAC) [now known as the Community Health Nurses of Canada, CHNC] and the Public Health Agency of Canada (PHAC). Using the *Core Competencies for Public Health in Canada Release 1.0* (PHAC, 2007), the *Community Health Nursing Standards of Practice* (CHNAC, 2008), and the *Public Health Nursing Practice in Canada: A Review of the Literature* (Hogan, 2008) as a foundation, a Delphi process was used to achieve consensus on the development of the discipline specific competencies for public health nurses. The outcome of this work is the *Public Health Nursing Discipline Specific Competencies Version 1.0*. The ‘version 1.0’ designation is intended to imply that the PHN competencies will evolve and change over time, as nursing and public health practice knowledge evolves.”

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<sup>6</sup> This document is available for download in French or English at <http://www.chnc.ca/nursing-publications.cfm>.

## Assessment of the Public Health Nursing Discipline Specific Competencies, Version 1.0 using the CNA Social Justice Gauge – Version 2.0

Canadian Nurses Association Social Justice Gauge – Version 2.0		
<i>Public Health Nursing Discipline Specific Competencies, Version 1.0</i>		
	RECOGNITION	RESPONSIBLE ACTION
<p>1. Does it acknowledge that different individuals or groups occupy different positions of social advantage in society?</p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p>	<p>“Public Health Nursing Competencies are the integrated knowledge, skills, judgement and attributes...required to practice safely and ethically. Attributes include, but are not limited to attitudes, values and beliefs”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>attributes are defined and these are at the heart of the document</i></li> <li>• <i>ethical practice is clearly a goal</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>equity or social justice could be explicitly mentioned in the introductory phrases</i></li> </ul> <p>A public health nurse is able to (1.1) “apply knowledge about...inequities in health; the determinants of health and illness; social justice; principles of primary health care;...factors that influence the delivery and use of health services”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>very explicit mention and inclusion of these concepts in the competencies</i></li> </ul> <p>A public health nurse is able to (1.4) “critically appraise knowledge”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>encourages nurses to question critically and not just accept status quo</i></li> </ul> <p>Use of an “Expert Group” to create the document</p> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>how were these people identified?</i></li> <li>• <i>do they speak for all stakeholders?</i></li> <li>• <i>was any broader consultation done?</i></li> </ul> <p>The use of a Dephi process to achieve consensus in creating the document</p> <p><i>Area(s) for improvement:</i></p>	<p>(1.5) A public health nurse is able to “use evidence and research to inform health policies” and (2) make “evidence-based decisions” and (3C.3) “integrate relevant research and implement evidence informed practice”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>promotes evidence-based practice to support unbiased actions</i></li> </ul> <p>A public health nurse is able to (3A.5) “support community action” and (3C.4) “participate in collaborative, interdisciplinary and intersectoral partnerships” and (3D.3) “evaluate programs in partnership” and (4.2) “use skills such as team building, negotiation, conflict management and group facilitation” and (8.7) “mobiliz[e] colleagues”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>helps provide opportunities for participation and gives a voice to various stakeholders</i></li> <li>• <i>supports leadership and advocacy on the part of the nurse</i></li> </ul> <p>A public health nurse is able to (3C.11) “advocate in collaboration with, and on behalf of,...individuals, families, groups and communities on social justice related issues”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>excellent: there is a specific mention of social justice and it is linked to some action</i></li> </ul> <p>A public health nurse is able to (5.2) “address population diversity when planning, implementing, adapting and evaluating public health programs and</p>

<b>Canadian Nurses Association Social Justice Gauge – Version 2.0</b>		
<b>Public Health Nursing Discipline Specific Competencies, Version 1.0</b>		
	<b>RECOGNITION</b>	<b>RESPONSIBLE ACTION</b>
	<ul style="list-style-type: none"> <li>• <i>this should be explained further</i></li> <li>• <i>does it ensure fairness in the process?</i></li> </ul>	<p>policies”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>very good: stresses the recognition of differences and specific actions are listed</i></li> </ul> <p>A public health nurse is able to (5.3) “apply culturally-relevant and appropriate approaches with people from diverse cultural, socioeconomic and educational backgrounds, and persons of all ages, genders, health status, sexual orientations and abilities”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>excellent: very specific</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>might there be an example or even an area that could be highlighted in a “such as” statement?</i></li> </ul> <p>A public health nurse is able to (8.4) “adapt...techniques, approaches and procedures to the challenges of particular community situation or setting”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>acknowledges differences and proposes action</i></li> </ul>
	<p>A public health nurse is able to (2.9) recognize opportunities to promote social justice”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>excellent specific mention</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>examples could be given of where this might happen</i></li> </ul> <p>A public health nurse is able to (3A.2) “describe the implications of each policy option...as they apply to the determinants of health” and (3B.2) “describe the implications of each [program] option...as they apply to the determinants of health”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>stresses the importance of underlying determinants</i></li> </ul> <p><i>Area(s) for improvement:</i></p>	<p>A public health nurse is able to (2.7) “describe the role of power in relationships by giving voice to the vulnerable” and “demonstrate skill in dealing with diversity”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>excellent specific mention</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>could be more clear about the way(s) in which this might be done</i></li> </ul> <p>A public health nurse is able to (3C.10) “take action to protect...from unsafe or unethical circumstances”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>encourages action</i></li> </ul>

<b>Canadian Nurses Association Social Justice Gauge – Version 2.0</b>		
<b>Public Health Nursing Discipline Specific Competencies, Version 1.0</b>		
	<b>RECOGNITION</b>	<b>RESPONSIBLE ACTION</b>
	<p>• <i>could also say “determinants of health and health equity”</i></p> <p>(4) “This category captures competencies required to influence and work with others...This includes the concepts of: social justice...; partnership and collaboration...; advocacy...which...aims to reduce inequities”</p> <p><i>Strength(s):</i></p> <p>• <i>excellent: clear and explicit acknowledgement of the ideals, and concepts of social justice, etc., are defined</i></p>	<p><i>Area(s) for improvement:</i></p> <p>• <i>does not specify or give examples</i></p> <p>A public health nurse is able to (3D.2) “evaluate programs in relation to determinants of health and health outcomes”</p> <p><i>Area(s) for improvement:</i></p> <p>• <i>does not mention health equity or the distribution of health</i></p> <p>A public health nurse is able to (4.1) “advocate for societal change in support of health for all...collaborate with partners,...build coalitions,...facilitate... change... to impact the determinants of health”</p> <p><i>Strength(s):</i></p> <p>• <i>excellent: specific mention and specific actions</i></p> <p>A public health nurse is able to (4.5) “involve individuals, families, groups and communities as active partners to identify assets, strengths and available resources and to take action to address health inequities”</p> <p><i>Strength(s):</i></p> <p>• <i>excellent: specific mention and specific actions</i></p> <p>A public health nurse is able to (6.1) “...use verbal, non verbal, written or graphic communication skills,...plain language,...multi-sensory forms of communication to address unique communication styles,...culturally relevant communication”</p> <p><i>Strength(s):</i></p> <p>• <i>excellent: very specific actions to support inclusion, equity, social justice</i></p> <p>A public health nurse is able to (8.5) “advocate for effective, efficient and responsible use of resources”</p>



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Public Health Nursing Discipline Specific Competencies, Version 1.0		
	RECOGNITION	RESPONSIBLE ACTION
		<p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>seems to have the right meaning</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>not clear what each of these concepts means</i></li> </ul>
<p>2. Does it acknowledge that unfair differences (inequities) exist in the opportunities and outcomes of different individuals or groups?</p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p>	<p>A public health nurse is able to (2.1) “assess the impact of the broad social, cultural, political and economic determinants of health” and (2.5) “...political climate and will; values and culture; social and systemic structures; settings; as well as the individual, family, group and community’s readiness and capacity” and (2.6) “...the context of their environmental and social supports” and (5.1) “how the determinants of health (biological, social, cultural, economic and physical) influence the health and well-being of specific population groups”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>recognizes underlying broad determinants of health</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>does not specifically mention equity, justice or the unfair distribution of health as implications of these factors</i></li> </ul> <p>A public health nurse is able to (2.7) “determine the meaning of information, considering...contexts [including the identification of] attitudes, beliefs, feelings and values about health”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>important acknowledgement of the many aspects of context that affect health</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>does not specifically mention equity, fairness, justice</i></li> </ul>	<p>A public health nurse is able to (1.6) “pursue lifelong learning...consistent with...the changing needs of individuals, families, groups and communities... [and] emerging research...about the impact of the determinants of health”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>acknowledges the need to keep knowledge and learning current</i></li> <li>• <i>stresses determinants of health</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>could specifically mention differential needs or the distribution of health and illness</i></li> </ul> <p>A public health nurse is able to (1.7) “integrate multiple ways of knowing into practice”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>important acknowledgement of fundamental differences here</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>does not give guidance or ideas as to how this integration might be done</i></li> </ul> <p>A public health nurse is able to (3A.6) “build community capacity to improve health and address health inequities” and (7.2) “contribute...by actively working...in partnership with community partners to build capacity” and (7.6) “mentor students and orient new staff”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>excellent: specific mention of addressing health inequities through a specific channel of capacity building</i></li> </ul> <p>A public health nurse is able to (3A.8)</p>

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<b>Public Health Nursing Discipline Specific Competencies, Version 1.0</b>		
	RECOGNITION	RESPONSIBLE ACTION
		<p>“advocate for the reduction of inequities in health through legislative and policy making activities”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>excellent: calls for advocacy on health inequities via a specific action</i></li> </ul> <p>A public health nurse is able to (4.3) “mediate between differing interests in the pursuit of health and well-being, and advocate for appropriate resource allocation and equitable access to resources”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>excellent: specific mention of equity and specific action</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>could say health and well-being for all</i></li> </ul> <p>A public health nurse is able to (4.4) “advocate for healthy public policies and services that promote and protect...health and well-being...”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>targets root causes</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>could say “and the distribution of health and well-being”</i></li> </ul> <p>A public health nurse is able to (7.3) “use public health and nursing ethics...and practice in accordance with...legislation, regulating body standards and codes” and (8.2) “apply ethical standards”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>mentions codes of ethics, child welfare legislation, etc.</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>assumes current codes are satisfactory • does not mention being aware or critical of this point</i></li> </ul> <p>(8) Nurses must ensure “the delivery of</p>

Canadian Nurses Association Social Justice Gauge – Version 2.0		
Public Health Nursing Discipline Specific Competencies, Version 1.0		
	RECOGNITION	RESPONSIBLE ACTION
		<p>safe, compassionate, competent and ethical care... [and initiate] strategies that will address the determinants of health and generate a positive impact on people and systems”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>specific mention of ethical care</i></li> <li>• <i>stresses the importance of the determinants of health</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>could also mention health equity or the distribution of health</i></li> </ul> <p>A public health nurse is able to (8.3) “consult as needed...in response to ethical dilemmas,...risks to human rights and freedoms”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>excellent: specific mention of human rights and specific action</i></li> </ul>
<p>3. Does it acknowledge root causes of inequities?</p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p>	<p>A public health nurse is able to (2.1) “assess the impact of the broad social, cultural, political and economic determinants of health” and (2.5) “...political climate and will; values and culture; social and systemic structures; settings; as well as the individual, family, group and community’s readiness and capacity” and (2.6) “...the context of their environmental and social supports” and (5.1) “how the determinants of health (biological, social, cultural, economic and physical) influence the health and well-being of specific population groups”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>recognizes underlying broad determinants of health</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>does not specifically mention equity, justice or the unfair distribution of health as implications of these factors</i></li> </ul> <p>A public health nurse is able to (2.7) “determine the meaning of information, considering...contexts [including the identification of] attitudes, beliefs, feelings and values about health”</p> <p><i>Strength(s):</i></p>	<p>A public health nurse is able to (1.6) “pursue lifelong learning...consistent with...the changing needs of individuals, families, groups and communities... [and] emerging research...about the impact of the determinants of health”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>acknowledges the need to keep knowledge and learning current</i></li> <li>• <i>stresses determinants of health</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>could specifically mention differential needs or the distribution of health and illness</i></li> </ul> <p>A public health nurse is able to (1.7) “integrate multiple ways of knowing into practice”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>important acknowledgement of fundamental differences here</i></li> </ul> <p><i>Area(s) for improvement:</i></p>

<b>Canadian Nurses Association Social Justice Gauge – Version 2.0</b>		
<b>Public Health Nursing Discipline Specific Competencies, Version 1.0</b>		
	<b>RECOGNITION</b>	<b>RESPONSIBLE ACTION</b>
	<ul style="list-style-type: none"> <li>• <i>important acknowledgement of the many aspects of context that affect health</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>does not specifically mention equity, fairness, justice</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>does not give guidance or ideas as to how this integration might be done</i></li> </ul> <p>A public health nurse is able to (3A.6) “build community capacity to improve health and address health inequities” and (7.2) “contribute...by actively working...in partnership with community partners to build capacity” and (7.6) “mentor students and orient new staff”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>excellent: specific mention of addressing health inequities through a specific channel of capacity building</i></li> </ul> <p>A public health nurse is able to (3A.8) “advocate for the reduction of inequities in health through legislative and policy making activities”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>excellent: calls for advocacy on health inequities via a specific action</i></li> </ul> <p>A public health nurse is able to (4.3) “mediate between differing interests in the pursuit of health and well-being, and advocate for appropriate resource allocation and equitable access to resources”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>excellent: specific mention of equity and specific action</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>could say health and well-being for all</i></li> </ul> <p>A public health nurse is able to (4.4) “advocate for healthy public policies and services that promote and protect...health and well-being...”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>targets root causes</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>could say “and the distribution of health and well-being”</i></li> </ul>

Canadian Nurses Association Social Justice Gauge – Version 2.0		
Public Health Nursing Discipline Specific Competencies, Version 1.0		
	RECOGNITION	RESPONSIBLE ACTION
		<p>A public health nurse is able to (7.3) “use public health and nursing ethics...and practice in accordance with...legislation, regulating body standards and codes” and (8.2) “apply ethical standards”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>mentions codes of ethics, child welfare legislation, etc.</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>assumes current codes are satisfactory • does not mention being aware or critical of this point</i></li> </ul> <p>(8) Nurses must ensure “the delivery of safe, compassionate, competent and ethical care... [and initiate] strategies that will address the determinants of health and generate a positive impact on people and systems”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>specific mention of ethical care</i></li> <li>• <i>stresses the importance of the determinants of health</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>could also mention health equity or the distribution of health</i></li> </ul> <p>A public health nurse is able to (8.3) “consult as needed...in response to ethical dilemmas,...risks to human rights and freedoms”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>excellent: specific mention of human rights and specific action</i></li> </ul>

Notes:

1. This table is an abbreviated version of the CNA Social Justice Gauge – Version 2.0 template. See the Appendix for the full version.
2. Direct quotations from the document under assessment are enclosed in quotation marks. The reviewers' comments are italicized.

*Overall comments:*

The *Public Health Nursing Discipline Specific Competencies Version 1.0* are very well aligned with equity and social justice ideals. Indeed, the values of equity and fairness are reflected at the core of, and throughout, the document. The review has noted a few places in which the text could be strengthened or further clarified, but overall it is a strong document and could be used as a stimulus for reflection as other documents at CHNC are written, reviewed or revised or when programs or policies are developed.

## **Part 4: Assessment of the *Canadian Community Health Nursing Standards of Practice* Document<sup>7</sup>**

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The introductory web page for the *Community Health Nursing Standards of Practice*<sup>8</sup> states the following: “The Community Health Nursing Standards of Practice (CHNSoP) represent a vision for excellence in community health nursing. CHNAC [now known as the Community Health Nurses of Canada, CHNC] took a leadership role in the development of the CHNSoP. They were developed by a representative committee of community health nurses and reflect the integration of feedback from an extensive Canadian community health nursing consultation. These standards, which reflect the values of Canadian community health nurses, were released on October 3, 2003 and re-released in March 2008.”

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<sup>7</sup> This document is available for download in French or English at <http://www.chnc.ca/nursing-publications.cfm>.

<sup>8</sup> This description is taken from: <http://www.chnc.ca/nursing-publications.cfm>.

## Assessment of the Canadian CHN Standards of Practice Document using the CNA Social Justice Gauge – Version 2.0

Canadian Nurses Association Social Justice Gauge – Version 2.0		
Canadian Community Health Nursing Standards of Practice Document		
	RECOGNITION	RESPONSIBLE ACTION
<p>1. Does it acknowledge that different individuals or groups occupy different positions of social advantage in society?</p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p><i>In some cases, but this acknowledgement could be significantly strengthened.</i></p>	<p>(p. 6) Community health nursing evolved “from centuries of community care by laywomen and members of religious orders”</p> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>is the use of the term “laywomen” accurate or did men have a role in the history?</i></li> </ul> <p>(p. 6) “Community health nursing concepts...are essential to... nurses concerned with promoting and preserving the health of populations” and (p. 8) a public health nurse “focuses on promoting, protecting and preserving the health of populations [and] focuses on populations”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>a laudable goal</i></li> <li>• <i>opens up opportunities</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>does not mention health equity or specific vulnerable populations or social justice</i></li> </ul> <p>(p. 14) The community health nurse “assesses and understands individual and community capacities including norms, values, beliefs, knowledge, resources and power structures”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>important mention of these concepts</i></li> <li>• <i>provides opportunities because it is clearly within the scope of practice of community health nurses</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>does not specify that there are differential levels of capacity and that these are inequities and linked to unfair situations in society</i></li> </ul> <p>(p. 14) Dilemmas faced by community health nurses “include the priority of one</p>	<p>(p. 5) “The process to develop standards began...with a national panel of expert community health nurses, followed by extensive consultation with almost 1000 community health nurses across Canada. A representative committee of community health nurses in CHNAC used this consultation feedback to develop the national standards”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>opportunities for input from various stakeholders</i></li> </ul> <p>(p. 6) “A critical part of... [community health nursing] practice is to mobilize resources to support health by coordinating care and planning services, programs and policies with individuals, caregivers, families, other disciplines, organizations, communities and government(s)”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>a laudable description of practice</i></li> <li>• <i>refers to some action</i></li> <li>• <i>provides opportunity to consider more</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>does not mention equity or social justice</i></li> <li>• <i>does not acknowledge or propose responsible action to address differential positions of social advantage</i></li> </ul> <p>(p. 6) “Caring is expressed through competent practice and development of relationships that value the individual and community as unique and worthy of a nurse’s “presence” and attention. Community health nurses preserve, protect and enhance human dignity in all of their interactions”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>laudable ideas and suggested actions</i></li> <li>• <i>provides an opening to consider more</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>does not specifically mention equity or social justice or actions related to addressing different</i></li> </ul>



<b>Canadian Nurses Association Social Justice Gauge – Version 2.0</b>		
<b>Canadian Community Health Nursing Standards of Practice Document</b>		
	<b>RECOGNITION</b>	<b>RESPONSIBLE ACTION</b>
	<p>individual’s rights over the rights of another, individual or societal good, [and] allocation of scarce resources”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>gives specific and pressing examples of issues that relate to dealing with inequity</i></li> </ul>	<p><i>levels of social advantage</i></p> <p>(p. 8) A home health nurse “initiates, manages and evaluates the resources needed for the client to reach optimal well-being and function”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>acknowledges the importance of the determinants of health and the actions of a holistic evaluation of resources</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>does not specifically mention health equity, vulnerability, social justice or different levels of social advantage related to access to opportunities to be healthy</i></li> </ul> <p>(p. 12) The community health nurse “adapts community health nursing techniques, approaches and procedures as appropriate to the challenges in a particular community situation or setting” and (p. 12) “uses knowledge of the community to link with, refer to or develop appropriate community resources”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>good specific activities that are necessary when dealing with diverse populations and needs</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>does not mention why adaptation might be useful or necessary, especially in relation to equity and social justice</i></li> </ul> <p>(p. 12) The community health nurse “recognizes patterns and trends in epidemiological data and service delivery and initiates strategies for improvement”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>this is an important skill and action in order to assess inequities</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>it is not clear or explicit that this point refers to unfair distribution of advantage or of health and illness</i></li> </ul> <p>(p. 12) The community health nurse “is aware of and uses culturally relevant communication” and</p>

<b>Canadian Nurses Association Social Justice Gauge – Version 2.0</b>		
<b>Canadian Community Health Nursing Standards of Practice Document</b>		
	<b>RECOGNITION</b>	<b>RESPONSIBLE ACTION</b>
		<p>(p. 14) “provides culturally sensitive care in diverse communities and settings”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>improves access for different cultural groups,</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>does not mention why this might be important (related to inequities)</i></li> </ul> <p>(p. 13) The community health nurse “supports the individual, family, community or population to develop skills of self-advocacy”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>these skills could help vulnerable populations</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>does not acknowledge different existing levels of self-advocacy skills in populations</i></li> </ul> <p>(p. 13) The community health nurse “applies principles of social justice and engages in advocacy to support those who are not yet able to take action for themselves”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>this is a very strong statement that speaks directly to inequities and actions community health nurses take to work against them</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>it might not be immediately clear what the principles of social justice are and how these might be applied in practice</i></li> </ul> <p>(p. 13) “Connecting involves establishing and nurturing relationships and a supportive environment that promotes the maximum participation and self-determination of the individual, family and community”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>this is a strong statement that speaks to equity and social justice</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>it could be made more clear that maximum participation means across a population and not by an individual)</i></li> </ul>

<b>Canadian Nurses Association Social Justice Gauge – Version 2.0</b>		
<b>Canadian Community Health Nursing Standards of Practice Document</b>		
	<b>RECOGNITION</b>	<b>RESPONSIBLE ACTION</b>
		<p>(p. 14) The community health nurse “collaborates with individuals and communities to identify and provide programs and delivery methods that are acceptable to them and responsive to their needs across the life span and in different circumstances”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• very good</li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• what is meant by “different circumstances”?</li> </ul> <p>(p. 14) The community health nurse “uses strategies such as home visits, outreach and case finding to ensure access to services and health-supporting conditions for potentially vulnerable populations (e.g., persons who are ill, elderly, young, poor, immigrants, isolated or have communication barriers)</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• this is excellent and can be used as a model for other statements in the text</li> <li>• it gives specific actions and links them to the goal of improving access to specific populations and then gives examples</li> <li>• it is clear</li> </ul>
<p>2. Does it acknowledge that unfair differences (inequities) exist in the opportunities and outcomes of different individuals or groups?</p> <p>Yes <input checked="" type="checkbox"/>    No <input type="checkbox"/></p> <p><i>In some cases, but this acknowledgement could be significantly strengthened</i></p>	<p>(p. 5) “Practice standards describe the knowledge, skills, judgment and attitudes needed to practice nursing safely” and these standards “establish criteria or expectations for acceptable nursing practice and safe, ethical care”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• a mention of ethics and of particular attitudes</li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• does not clearly state equity or social justice or issues related to inequities in society</li> </ul> <p>(p. 6) “Community health nursing is rooted in caring... The social conscience expressed in community health nursing has been reflected in public policies”</p>	<p>(p. 6) “Community health nurses... collaborate with individuals, families, groups, communities and populations to design and carry out community development, health promotion and disease prevention strategies” and (p. 7) “Community health nurses believe that the individual or community must be an active partner in decisions” and (p. 11) the community health nurse “collaborates with the individual and community” and (p. 11) “engages collaborative, interdisciplinary and intersectoral partnerships” (there are many other specific mentions of collaboration and consultation) and (p. 12) “helps the individual and their community to participate in the resolution of their issues”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• encourages collaboration with various stakeholders and those immediately affected or experiencing issues</li> </ul>

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**Canadian Community Health Nursing Standards of Practice Document**

	RECOGNITION	RESPONSIBLE ACTION
	<p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• good to have this stated and a good base to work from in the profession</li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• it does not specifically mention equity, social justice or related concepts or issues</li> <li>• what is meant by the social conscience?</li> </ul> <p>(p. 6) “In community health nursing practice in Canada, caring is based on the principle of social justice”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• very good: the connection is made explicitly</li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• further explanation of what social justice is would strengthen this area</li> </ul> <p>(p. 10) “Standards of practice:</p> <ol style="list-style-type: none"> <li>1. Promoting health               <ol style="list-style-type: none"> <li>a) Health promotion</li> <li>b) Prevention and health protection</li> <li>c) Health maintenance, restoration and palliation</li> </ol> </li> <li>2. Building individual and community capacity</li> <li>3. Building relationships</li> <li>4. Facilitating access and equity</li> <li>5. Demonstrating professional responsibility and accountability”</li> </ol> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• the five standards of practice provide opportunities for supporting social justice and equity</li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• overall there could be more specific mention of social justice or equity</li> </ul> <p>(p. 10) “Community health nurses view health as a dynamic process of physical, mental, spiritual and social well-being. Health includes self-determination and a sense of connection to the community” and (p. 10) “They consider health as a resource for everyday life that is influenced by</p>	<ul style="list-style-type: none"> <li>• gives opportunities to these individuals and groups to have a voice</li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• does not specifically mention equity, social justice or related concepts or values</li> <li>• there is significant repetition in the document around the idea of collaboration, partnerships, etc.; this is an essential part of the work and philosophy of community health nurses but it may overshadow other aspects of the nurses’ work or risk being overlooked (or taken for granted) because it is mentioned so many times</li> </ul> <p>(p. 7) “Along with capacity building work, community health nurse have an advocacy role and responsibility. Their knowledge and experience equip them to advocate in partnership with clients who are vulnerable or intimidated in a particular situation and help them to access services (case advocacy)”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• excellent: explicit about the role of community health nurses and provides examples of concrete actions</li> </ul> <p>(p. 8) A public health nurse “practices in increasingly diverse settings, such as community health centres, schools, street clinics, youth centres and nursing outposts—and with diverse partners—to meet the health needs of specific populations”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• good mention of diverse settings, partners and populations</li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• does not explicitly state that there are different needs for different populations</li> <li>• does not mention health equity or social justice</li> </ul> <p>(p. 11) The community health nurse “uses a comprehensive range of strategies to address health-related issues” and (p. 13) “uses a comprehensive mix of community and population-based strategies such as coalition building, intersectoral partnerships and networking to address concerns of groups or populations”</p>

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<b>Canadian Community Health Nursing Standards of Practice Document</b>		
	<b>RECOGNITION</b>	<b>RESPONSIBLE ACTION</b>
	<p>circumstances, beliefs and determinants of health”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>this broad and upstream definition of health allows for a focus on the equity dimension.</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>it does not specifically acknowledge inequities in the distribution of health or health opportunities</i></li> <li>• <i>it does not link determinants of health (and ill health) to unfair distribution of health and health opportunities (inequities and social injustice)</i></li> </ul>	<p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>a range of strategies will likely reach more people in different groups</i></li> <li>• <i>some good specific examples provided</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>no acknowledgement of inequities related to health-related issues or why a range of strategies might be necessary</i></li> </ul> <p>(p. 11) “The activities of the community health nurse may range from health screening and care planning at an individual level to intersectoral collaboration and resource development at the community and population level”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>good examples of activities</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>does not link to, or mention, equity or social justice</i></li> </ul> <p>(p. 11) The community health nurse “evaluates...programs in partnership with the individual, community and other stakeholders” and (p. 12) “evaluates individual, family and community outcomes systematically and continuously in collaboration” and (p. 14) “monitors and evaluates changes and progress in access to the determinants of health and appropriate community services” and “systematically evaluate[s] the availability, acceptability, quality, efficiency and effectiveness of community health nursing practice”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>evaluation is a key to understanding inequities and the determinants of health</i></li> <li>• <i>mentions determinants of health and access</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>does not state explicitly whether equity or distribution of opportunity is one of the criteria to be used in evaluations</i></li> </ul> <p>(p. 15) The community health nurse “seeks professional development experiences...[on] new and emerging issues, the changing needs of the</p>

<b>Canadian Nurses Association Social Justice Gauge – Version 2.0</b>		
<b>Canadian Community Health Nursing Standards of Practice Document</b>		
	<b>RECOGNITION</b>	<b>RESPONSIBLE ACTION</b>
		<p>population, the evolving impact of the determinants of health and emerging research”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• a specific action, linked to a better understanding of current issues and needs</li> </ul> <p><i>Area(s) for improvement</i></p> <ul style="list-style-type: none"> <li>• does not explicitly include learning about inequities or social injustices and their determinants</li> </ul>
<p>3. Does it acknowledge root causes of inequities?</p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p><i>In some cases, but this acknowledgement could be significantly strengthened.</i></p>	<p>(p. 7) “Community health nurses recognize the impact of the social, political and economic environment on the health of individuals and the community, and on their own practice” and (p. 11) the community health nurse “recognizes the broad impact of specific issues on health promotion such as political climate and will, values and culture, individual and community readiness, and social and systemic structures</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• recognizes some of the root causes or determinants of health and illness and the importance of these factors for professional practice</li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• does not also state the impact on health and on the distribution of health (or health equity)</li> </ul> <p>(p. 7) “Community health nurses integrate multiple types of knowledge into their practice...[including] ethics [or moral knowledge] and socio-political knowledge”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• this is an important step and useful recognition that differences exist</li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• not clear what this means in practical terms: how do community health nurses interpret and do this?</li> </ul> <p>(p. 7) “Community health nurses recognize</p>	<p>(p. 6) “Community health nurses value...primary health care as described by the World Health Organization” [bullet points are provided to clarify this statement] and (p. 10) “[Health promotion] recognizes that basic resources and conditions for health are critical for achieving health”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• primary health care and the provision of basic resources are very important concepts and ideas to be aligned with as they have so many implications for equity and social justice</li> </ul> <p>(p. 7) “Community health nursing is able to question and move beyond the status quo, evolve and create relevant and effective action for community health”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• very good to have this stated explicitly</li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• the statement is vague and may not provide enough guidance to community health nurses as to how they might do this or what is meant by some of these concepts or ideas</li> </ul> <p>(p. 7) “Community health nurses also advocate for changes in policies, systems and resource allocation (class advocacy) to increase opportunities for health within society” and (p. 14) he or she “advocates for appropriate resource allocation...to support access to conditions for health and health services” and (p. 14) “takes action with and for individuals and communities...to address services gaps and accessibility issues” and (p. 14) “advocates for healthy public policy by participating in legislative</p>

<b>Canadian Nurses Association Social Justice Gauge – Version 2.0</b>		
<b>Canadian Community Health Nursing Standards of Practice Document</b>		
	<b>RECOGNITION</b>	<b>RESPONSIBLE ACTION</b>
	<p>that empowerment is an active, involved process where people, groups and communities move towards increased individual and community control, political efficacy, improved quality of community life and social justice”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>excellent: mentions social justice explicitly, makes clear the importance of empowerment as a determinant of health</i></li> </ul> <p>(p. 8) A public health nurse “recognizes that healthy communities and systems that support health contribute to opportunities for health for individuals, families, groups and populations”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>acknowledges some of the root causes of health and health opportunities</i></li> <li>• <i>focuses on determinants of health</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>does not specifically mention the differential opportunities for health in populations in society</i></li> </ul> <p>(p. 10) Health Canada’s determinants of health are listed.</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>it is important to acknowledge the determinants of health and not just focus on health or illness care</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>these are also determinants of health inequities, or an unfair distribution of health and health opportunities, so this could be clearly stated</i></li> </ul> <p>(p. 13) “[Community health nurses] are keenly aware of the impact of the determinants of health”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>it is very important to recognize these root causes</i></li> </ul>	<p>and policy-making activities”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>excellent: explicitly states the role and actions of community health nurses as related to advocacy</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>not 100% clear that this relates to advocating against unfair societal situation or for social justice or health equity</i></li> </ul> <p>(p. 7) “Critical examination of this nursing knowledge contributes to evidence-based community health nursing practice” and (p. 14) the professional accountability of community health nurses includes “ensuring that their knowledge is evidence-based and current”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>recommends using evidence to support unbiased decision-making</i></li> </ul> <p>(p. 10) The community health nurse “collaborates with individual, community and other stakeholders to do a holistic assessment of assets and needs of the individual or community” and (p. 11) “helps the individual and community to identify their strengths and available resources and take action to address their needs”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>mentions collaboration and acknowledges the need for holistic assessments of assets and needs</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>does not acknowledge that differences exist in the assets and needs of different members of the population or that there are inequities in society</i></li> </ul> <p>(p. 10) The community health nurse “uses a variety of information sources to access data and research findings related to health”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>recommends using various types of evidence to support unbiased actions and decisions</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>does not mention the quality or assessment of these sources of information for issues such as</i></li> </ul>

<b>Canadian Nurses Association Social Justice Gauge – Version 2.0</b>		
<b>Canadian Community Health Nursing Standards of Practice Document</b>		
	<b>RECOGNITION</b>	<b>RESPONSIBLE ACTION</b>
	<p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>again, health and health equity and social justice are not specifically mentioned</i></li> </ul>	<p><i>bias</i></p> <p>(p. 10) The community health nurse “identifies and seeks to address root causes of illness and disease”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>mentions root causes and mentions seeking to address these root causes</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>speaks only about illness and disease, not health or the distribution of these things in populations</i></li> <li>• <i>does not give specific ideas for action</i></li> </ul> <p>(p. 11) The community health nurse “understands and uses social marketing, media and advocacy strategies...to raise awareness..., place issues on the public agenda, shift social norms and change behaviours”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>great statement: clearly speaks to advocacy, lists specific actions and gives reasons why these actions should be undertaken</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>does not specifically mention inequities or social justice or give examples of the kinds of issues, norms or behaviours that might need attention</i></li> </ul> <p>(p. 12) The community health nurse “facilitates action...to promote social responsibility for health, increase investments for health development[,],...expand partnerships[,],...increase...capacity[,],...[and] secure infrastructure for health promotion”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>these are all positive ideas</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>equity or social justice is not specifically mentioned and the statement is quite vague about issues such as the exact meaning of “facilitates action” and “social responsibility”</i></li> </ul> <p>(p. 13) Community health nurses “collaboratively identify and facilitate universal and equitable access to available services”</p>



<b>Canadian Nurses Association Social Justice Gauge – Version 2.0</b>		
<b>Canadian Community Health Nursing Standards of Practice Document</b>		
	<b>RECOGNITION</b>	<b>RESPONSIBLE ACTION</b>
		<p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>strong statement: specifically mentions equity and is linked to an action</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>it might not be clear what specific actions might be included in identifying and facilitating access: what does this look like in practice?</i></li> </ul> <p>(p. 13) “Community health nurses engage in advocacy by analyzing the determinants of health and influencing other sectors to ensure their policies and programs have a positive impact on health” and are responsible for “initiating strategies that will help address the determinants of health and generate a positive impact on people and systems”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>very good: targets root causes and is linked to specific actions</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>does not explicitly mention that policies should have a positive impact on health and its distribution, health equity or social justice</i></li> </ul> <p>(p. 14) The community health nurse “takes preventive or corrective action...to protect individuals and communities from unsafe or unethical circumstances” and (p. 15) “acts upon legal obligations to report to appropriate authorities any situations of unsafe or unethical care” and (p. 15) “makes decisions using ethical standards and principles, taking into consideration the tension between individual versus societal good and the responsibility to uphold the greater good of all people or the population as a whole”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>promotes action on these issues within the scope of practice of community health nurses</i></li> <li>• <i>focuses on ethics and ethical care</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>not clear what preventive or corrective actions there might be or how a community health nurse might judge a circumstance to be unethical</i></li> <li>• <i>is this based on the Code of Ethics for</i></li> </ul>

<b>Canadian Nurses Association Social Justice Gauge – Version 2.0</b>		
<b>Canadian Community Health Nursing Standards of Practice Document</b>		
	<b>RECOGNITION</b>	<b>RESPONSIBLE ACTION</b>
		<p>Registered Nurses <i>in Canada</i>?</p> <ul style="list-style-type: none"> <li>• <i>does not seem to leave space for work with targeted groups if the population as a whole is the focus</i></li> <li>• <i>somewhat unclear</i></li> </ul> <p>(p. 15) The community health nurse “advocates for societal change in support of health for all”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>excellent: a good example of where an action (advocacy) is linked to health for all</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>could be strengthened by including examples or clarifying what advocacy or health for all might mean in practical terms</i></li> </ul> <p>(p. 15) The community health nurse “seeks help with problem solving as needed to determine the best course of action in response to ethical dilemmas, risks to human rights and freedoms, new situations and new knowledge”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>recognizes that community health nurses will encounter these situations and gives specific action</i></li> <li>• <i>specifically mentions human rights</i></li> </ul>

*Notes:*

1. This table is an abbreviated version of the CNA Social Justice Gauge – Version 2.0 template. See the Appendix for the full version.
2. Direct quotations from the document under assessment are enclosed in quotation marks. The reviewers' comments are italicized.

*Overall comments:*

There is a significant amount of strong material in the *Canadian Community Health Nursing Standards of Practice* with respect to equity and social justice. The document squarely positions the community health nursing profession to include recognition and responsible action against inequities as part of its scope of practice. The text could be strengthened overall by making the link between community health nursing and societal injustice more explicitly throughout. There are many cases in the text where health or the health of the population is the focus; the text could be changed to read “health and health equity”, or “health and its distribution” or “health and social justice.” There are also many places where specific ideas, definitions or a few more explanatory notes would help to clarify the meaning of the text. The text seems to be aligned with social justice and equity ideals but it is not always obvious to the reader that these ideals are implied.

The inclusion of definitions in the supporting material after page 15 in the *Canadian Community Health Nursing Standards of Practice* strengthens the text and provides a bit of the explicit material that is called for in this review. In some cases, however, it would be beneficial to include the definition (or a version of it) directly in the text. There are many cases of repetition of concepts and ideas (i.e., consultation, determinants of health, advocacy, evidence-based practice). Some repetition is very positive, especially because these are main ideas and principles that should be stressed, but in some cases the repetition seemed excessive and may have weakened the impact of the text. In future revisions it may be possible to condense the document somewhat, reducing the amount of duplication, and thereby strengthen the impact of the stated standards, values, beliefs and actions.

## Part 5: Assessment of the Canadian Community Health Nursing Practice Model

The *Canadian Community Health Nursing Standards of Practice* states the following: “The Canadian Community Health Nursing Practice Model has been developed specifically for this Standards document to reflect the knowledge and experience of community health nurses in practice, education, research and administration across Canada. The model illustrates the dynamic nature of community health nursing practice, embracing the present and projecting into the future.” A copy of the model is available on page 9 of the Standards document.<sup>9</sup>

### Assessment of the Canadian CHN Practice Model using the CNA Social Justice Gauge – Version 2.0

Canadian Nurses Association Social Justice Gauge – Version 2.0		
<i>Canadian Community Health Nursing Practice Model</i>		
	RECOGNITION	RESPONSIBLE ACTION
<p>1. Does it acknowledge that different individuals or groups occupy different positions of social advantage in society?</p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p><i>To some degree, but this acknowledgement could be strengthened.</i></p>	<p>The values and beliefs of community health nurses are explicitly included in the model: caring (grounded in the concept of social justice), the principles of primary health care (including universal access, a focus on the determinants of health, active stakeholder participation, partnerships and the appropriate use of knowledge), multiple ways of knowing, individual and community partnerships, and empowerment.</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• these values and beliefs are clearly stated and align excellently with social justice and equity ideals</li> <li>• they provide an underpinning to the profession of community health nursing that opens opportunities for many different kinds of work toward social justice and equity.</li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• the model would have been stronger if just a line or two had been included in the values and beliefs portion to state that community health nurses acknowledge that different individuals or groups occupy different positions of social advantage in society or that inequities (or unfair differences) exist in society and that community health nurses have an obligation to</li> </ul>	<p>“[The standards] apply to practice in all settings where people live, work, learn, worship and play.”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• it is good to recognize these diverse practice settings</li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• the text does not state that there will be differences in different settings or that there may be some settings or groups that require more attention</li> </ul> <p>“The focus of community health nursing is always on improving the health of people in the community and encouraging change in systems and society to support health”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• a strong statement with good intentions.</li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• could state more clearly that the focus is improving the health of all people in the community (particularly populations in situations of social disadvantage) and encourage change to support health for all</li> <li>• some specifics could be provided around the</li> </ul>

<sup>9</sup> See page 9 of the *Canadian Community Health Nursing Standards of Practice* document ([http://www.chnc.ca/documents/chn\\_standards\\_of\\_practice\\_mar08\\_english.pdf](http://www.chnc.ca/documents/chn_standards_of_practice_mar08_english.pdf)).

<b>Canadian Nurses Association Social Justice Gauge – Version 2.0</b>		
<b>Canadian Community Health Nursing Practice Model</b>		
	<b>RECOGNITION</b>	<b>RESPONSIBLE ACTION</b>
	<i>act to right these inequities</i>	<i>action of “encouraging change”</i>
<p>2. Does it acknowledge that unfair differences (inequities) exist in the opportunities and outcomes of different individuals or groups?</p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p><i>To some degree, but this acknowledgement could be strengthened.</i></p>	<p>One of the five Canadian Community Health Nursing Standards of Practice is facilitating access and equity. The standards also include promoting health, building capacity, building relationships and professional responsibility and accountability.</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>these explicit standards open many opportunities for community health nurses to engage in activities that support social justice and equity</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>the text accompanying the model does not always clearly state how the standards can be operationalized to support equity and social justice</i></li> </ul> <p>“The organizations community health nurses work for also influence their practice... These diverse influences can be enabling factors, or they may constrain”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>acknowledges the differential experiences of the community health nurses themselves and the limiting factors in their work environments</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>a similar kind of statement is not made about clients or patients or individuals and groups in society</i></li> </ul>	
<p>3. Does it acknowledge root causes of inequities?</p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p><i>To some degree, but this acknowledgement could be strengthened.</i></p>	<p><i>The statements about the values and beliefs of community health nurses do speak to the root causes and determinants of health and health inequities. However, it is not clearly or strongly stated or acknowledged that inequities are a key or important focus.</i></p> <p>“Community health nurses are accountable to a variety of authorities and stakeholders (e.g., regulatory bodies, employers and the public)”</p>	<p><i>The model does not explicitly reflect the role of community health nurses as advocates. This role can be implied in phrases such as “facilitating access and equity” or in words such as “empowerment” or “caring” but it is not 100 per cent clear what actions community health nurses should take and that they should act to right societal inequities.</i></p>

<b>Canadian Nurses Association Social Justice Gauge – Version 2.0</b>		
<b>Canadian Community Health Nursing Practice Model</b>		
	<b>RECOGNITION</b>	<b>RESPONSIBLE ACTION</b>
	<p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>recognizes the importance of health-care workers being accountable for their practice not just to the system but to their clients and the public</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>if space permits, the text would be strengthened by stating what this means to the practice of community health nurses</i></li> </ul> <p>“Community health nursing practice does not happen in isolation but within an environmental context (socio-political environment). It is influenced by social, economic and political forces that shape legislation and public policies.”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>it is excellent that this is stated</i></li> <li>• <i>the model clearly shows that community health nursing practice is set within a socio-political environment</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>the text could also mention that this same environment (and other determinants of health) underpins societal inequities that should be mitigated</i></li> </ul>	

*Notes:*

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2. Direct quotations from the document under assessment are enclosed in quotation marks. The reviewers' comments are italicized.

*Overall comments:*

The Canadian Community Health Nursing Practice Model supports social justice and equity ideals in many important but often implicit ways. The inclusion and prominence of the five standards of practice (which include facilitating access and equity, building relationships and capacity and being accountable in the profession) and the stated values and beliefs provide guidance and a very solid grounding for community health nurses to be active participants and advocates in actions that support social justice and equity. The model would be strengthened by including in the accompanying text more explicit material about equity or social justice or both (a few lines or statements would suffice) and some specific examples of responsible action linked to the stated values, beliefs and standards of practice.

## **Part 6: Assessment of the *Canadian Community Health Nursing Standards of Practice (CCHN Standards) Toolkit*<sup>10</sup>**

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The introductory material in the *Canadian Community Health Nursing Standards of Practice (CCHN Standards) Toolkit* states the following: “The Community Health Nurses Association of Canada (CHNAC), a federation of provincial/territorial community health nursing interest groups and members, released the Canadian Community Health Nursing (CCHN) Standards of Practice in May 2003. These Standards were accepted by the Canadian Nurses Association (CNA), leading to Community Health Nursing being recognized as a specialized field of nursing... The CCHN Standards Toolkit provides a process, tools and resources for raising awareness of the Standards and facilitating their use. It will be most effective if used as a whole. By building on and adapting existing organizational structures and practices the Toolkit aims to create an environment in which nurses are encouraged and supported to attain and maintain continuing competence.”

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<sup>10</sup> The toolkit (currently available only in English) is available for download at <http://www.chnc.ca/nursing-publications.cfm>.

## Assessment of the Canadian CHN Standards of Practice Toolkit using the CNA Social Justice Gauge – Version 2.0

Canadian Nurses Association Social Justice Gauge – Version 2.0		
Canadian Community Health Nursing Standards of Practice (CCHN Standards) Toolkit <sup>11</sup>		
	RECOGNITION	RESPONSIBLE ACTION
<p>1. Does it acknowledge that different individuals or groups occupy different positions of social advantage in society?</p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p><i>But the acknowledgement could be much stronger</i></p>	<p>(p. 5) Three career stages are identified: “registered nurses with two or more years community nursing experience,” “registered nurses new to community practice” and “nursing students”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• recognizes the different groups of community health nursing stakeholders and their varying needs and levels of experience.</li> </ul> <p>(p. 8) The goal in getting started is to “set up the team to take responsibility for integrating the CCHN Standards”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• a group approach will ensure better involvement of stakeholders</li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• does not specify that the makeup of the group should take into account equity concerns</li> </ul> <p>(p. 20) “Who is interested/involved, ready and able to provide support? Who needs to be? Who needs to be kept informed? What/whose opinion needs to be changed?”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• recognizes that there is probably a diverse group of stakeholders for any one topic</li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• does not indicate that some will be easier to engage than others</li> <li>• does not indicate whether particular groups might take precedence for involvement</li> </ul> <p>(p. 27) “The Standards require that the community health nurse is skilled in selecting</p>	<p>(p. 13) In identifying and engaging the stakeholders, “pay particular attention to those who work across the organization or across organizational boundaries, for example, staff with joint-appointments to educational institutions, those who sit on external committees, and board members.”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• recognizes the need to engage people from different groups</li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• the rationale for this is focused on an in-depth or holistic adoption of the standards in an organization, rather the equity</li> </ul> <p>(p. 48) Three of the indicators for Standard 4: “Advocating for appropriate resource allocation for individuals, groups, communities to facilitate access to the conditions for health,” “providing culturally sensitive care in diverse communities and settings” and “supporting individuals/ communities in their choice to access alternate care options”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• these are all important activities and will be useful indicators of facilitating access and equity</li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• other indicators could have been included (e.g., relating to vulnerable or disadvantaged populations)</li> </ul> <p>(p. 74, slide 28) “A PHN [public health nurse] identifies that one ethnic group does not use health care services (including prenatal classes) outside their area. The PHN works with a champion from this group to organize</p>

<sup>11</sup> The toolkit is 107 pages in length. The present review is a holistic assessment rather than a page-by-page or line-by-line assessment of the text.



<b>Canadian Nurses Association Social Justice Gauge – Version 2.0</b>		
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	<b>RECOGNITION</b>	<b>RESPONSIBLE ACTION</b>
	<p>and using the communication methods and messages appropriate to the community being served... [A nurse working with families] would emphasize the requirement to establish culturally appropriate relationships from initiation through to termination.”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>important to recognize the need for these skills</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>does not clearly state why this might be so important in terms of equity</i></li> </ul> <p>(p. 77, position description for a public health nurse) “Inherent in this role are knowledge, skills, and abilities specific to health promotion, primary and secondary prevention strategies”</p> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>in this general job summary there is no mention of overall skills in working with diverse groups or in understanding or working to mitigate inequities or support social justice; these elements could be emphasized</i></li> </ul> <p><i>The CCHN practice model is used throughout the toolkit with a text-based explanation. This provides consistency of message (vision, mission, values, etc.) and it provides an opportunity to emphasize equity and social justice in really any work associated with community health nursing.</i></p>	<p>local prenatal classes delivered by a PHN and translated by woman from the community.”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>this is a good example to stimulate discussion of equity and social justice</i></li> </ul> <p>(p. 74) “What example does your team have of using aspects of this standard?”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>this could be an opening for the group to discuss equity or social justice</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>the group could be further guided to consider examples that may have equity dimensions or implications</i></li> </ul> <p>(p. 78, position description for a public health nurse) “Demonstrated knowledge and/or ability in health promotion and prevention strategies including advocacy for healthy public policy[,]... ability to work collaboratively with team members and the community at large...and...ability to communicate effectively orally and in writing with clients of varying ages, socio-economic status, and targeted populations”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>these are clearly stated and useful qualities to seek in a candidate</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>the employer could more explicitly ask about, or require experience or knowledge in, equity issues or social justice</i></li> </ul>
<p>2. Does it acknowledge that unfair differences (inequities) exist in the opportunities and outcomes of different individuals or groups?</p> <p>Yes <input checked="" type="checkbox"/>    No <input type="checkbox"/></p> <p><i>But the acknowledgement could be much stronger.</i></p>	<p>(p. 8) “Teams with limited resources may have to start slowly and attempt small changes, whereas others will be ready for a speedier, more comprehensive approach”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>recognizes that not all groups start at the same place</i></li> </ul> <p>(p. 28) Separate interview questions are listed for practitioners new to community health nursing and practitioners with two or more years experience in community health nursing</p>	<p>(p. 21) A mentoring program “ensures new staff and their mentors have basic understanding and develop competence in accordance with CCHN Standards” and “orients/reinforces student and preceptor awareness of Standards”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>a focus on making new members aware of the standards</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>The strength of the equity or social justice</i></li> </ul>

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	<p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>acknowledges the need for a different approach or question for someone with more experience</i></li> </ul> <p>(p. 63, slide 11) “CCHN Standards can improve access to quality care through expecting quality outcomes for patients and community”</p> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>this is an important point but it could emphasize all groups or all people in the community, noting equity or justice in this way</i></li> </ul> <p>(p. 79, position description for public health nurses) “Advocate” Is the first item in a list of job functions.</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>clearly includes advocacy in the scope of practice for community health nurses</i></li> </ul> <p>(p. 84, interview question) “Explain situations where advocacy for healthy public policy would be appropriate. (Possible positive responses):</p> <ul style="list-style-type: none"> <li>• <i>Where some regulations/ guidelines/ bylaws/legislation [are] necessary to ensure public safety and improve health outcomes</i></li> <li>• <i>Could include smoking, drinking, driving, immunizations”</i></li> </ul> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>a helpful question to gauge the candidate’s understanding of healthy public policy</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>assessment of candidate’s response did not include equity; health outcomes overall are different from the differential outcomes or the distribution of health and opportunities to be healthy</i></li> </ul> <p>(p. 85, interview question) “If there is an increase of youth gangs in a low income, multicultural area, what strategies would you use to intervene to reduce this behaviour?” Possible positive responses include advocacy, communication with particular groups,</p>	<p><i>component in this part of the toolkit relies on a particular focus, explanation or interpretation of the standards themselves. This relationship is in fact true for the entire toolkit. The toolkit’s equity and social justice components can only be as strong as the same concepts in the standards and their supporting documentation.</i></p> <p>(p. 68, slide 27, examples from practice – facilitating access and equity) “A [home health nurse] and Case Manager work together to advocate for families caring for medically fragile children by:</p> <ul style="list-style-type: none"> <li>• <i>Seeking respite care for a family exhausted by the required intense care.</i></li> <li>• <i>Contacting the local MPP to encourage enhanced funding for respite services</i></li> <li>• <i>Planning for a resolution through the local RNAO [Registered Nurses Association of Ontario] Chapter for the RNAO AGM”</i></li> </ul> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>detailed</i></li> <li>• <i>provides concrete actions</i></li> <li>• <i>demonstrates a concern for equity as it relates to this particular vulnerable group</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>not immediately clear why this particular group is singled out</i></li> </ul> <p>(p. 68, slide 26, overview)</p> <ul style="list-style-type: none"> <li>• <i>CHNs [community health nurses] identify &amp; facilitate universal &amp; equitable access to available services</i></li> <li>• <i>CHNs engage in advocacy on many levels</i></li> <li>• <i>CHNs work with others to promote effective working relationships that contribute to comprehensive client care &amp; achievement of optimal outcomes”</i></li> </ul> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>these are clear and directly mention such concepts as universal and equitable access</i></li> <li>• <i>clearly align advocacy with the work of community health nurses</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>optimal outcomes could be better defined (does this have to do with overall outcomes or</i></li> </ul>

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	<p>organization of meetings, etc.</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• a good question to gauge the candidate's understanding of and approach to complex issues</li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• does not mention equity, social justice, disadvantage or the like in the question or in the possible positive responses</li> </ul> <p>(p. 87, performance standards and indicators):                      "Has basic knowledge of the principles of public health prevention and promotion strategies including:</p> <ul style="list-style-type: none"> <li>- Determinants of health</li> <li>- Population Health Promotion Model</li> <li>- Ottawa Charter strategies</li> <li>- Primary and secondary prevention strategies</li> <li>- Harm reduction</li> <li>- Stages of change"</li> </ul> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• these are key and within each there is opportunity for knowledge of equity or social justice to be represented</li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• it would be stronger to have equity or social justice listed specifically</li> </ul> <p>(p. 89, performance standards and indicators for public relations) "Ability to relate to clients, community, agencies and population as a whole</p> <ul style="list-style-type: none"> <li>• Demonstrates concern for client's well being</li> <li>• Relates well with target group</li> <li>• Maintains confidentiality</li> <li>• Displays a courteous, calm manner to clients and colleagues</li> <li>• Positively promotes organizational objectives and programs to public/ co-workers/ professionals/ agencies</li> <li>• Demonstrates cultural sensitivity"</li> </ul> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• these are important points to state explicitly and have many implications for equity and</li> </ul>	<p><i>differential ones?)</i></p> <ul style="list-style-type: none"> <li>• more detail could be added to explain what is meant by "advocacy on many levels" (advocacy for what?)</li> </ul> <p>(p. 80, examples of job duties) "Influences community leaders and politicians to make policy decisions that address the health needs of injection drug users, sex-trade workers, correctional inmates and street involved persons"</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• good: provides examples of target groups and of specific actions</li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• why are these groups mentioned over others? (if they are just examples this should be made clear)</li> </ul> <p>(p. 81, examples of job duties) "Uses strategies to reduce communicable disease including immunization for selected populations"</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• this appears to refer to inequities associated with the uptake of immunization</li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• could be stated more clearly that there are differential rates or that there are different needs, levels of access and opportunity for different groups</li> </ul> <p>(p. 82, examples of job duties) "Influences community leaders and politicians to make policy decisions that address the determinants of health and environmental issues"</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• includes specific actions</li> <li>• both the determinants of health and environmental issues have deep connections to inequities and social injustice</li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• this connection is not stated explicitly</li> </ul>

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	<p><i>social justice</i></p> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>the initial statement could be worded along the following lines: “Ability to relate to all clients, communities and agencies (including those who may be vulnerable, disadvantaged or marginalized) as well as to the population as a whole</i></li> <li>• <i>the community health nurse should demonstrate not just cultural sensitivity but sensitivity on other fronts as well (gender, age, race, sexual orientation, disease status, etc.)</i></li> </ul>	<p>(p. 94, performance standards form)                      “Advocates for health public policy by participating in policy making activities that influence health determinants and access to services” and “advocates for appropriate resource allocation for...potential vulnerable populations”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>again, supports the role of the community health nurse as an advocate and this refers to equity issues and vulnerable populations as well</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>the statement could be strengthened</i></li> <li>• <i>equity or justice is implied in the discussion of the determinants of health and access but not explicitly mentioned</i></li> </ul> <p>(p. 94) “Participates in the advancement of community health nursing by mentoring students and novice practitioners”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>acknowledges the need to mentor and the importance of mentorship in a power-based society</i></li> </ul> <p>(p. 94) “Seeks assistance with problem solving as needed to determine the best course of action in response to ethical dilemmas and risks to human rights and freedoms, new situations, and new knowledge”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>mentions ethical dilemmas and human rights</i></li> <li>• <i>acknowledges the need for guidance and suggests specific action</i></li> </ul> <p>(p. 95, performance standard) “Uses evidence-based practice in decision making and selects appropriate models to guide practice”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>evidence-based decision-making helps eliminate bias and inequities in that process</i></li> </ul>

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	<b>RECOGNITION</b>	<b>RESPONSIBLE ACTION</b>
<p>3. Does it acknowledge root causes of inequities?</p> <p>Yes <input checked="" type="checkbox"/>    No <input type="checkbox"/></p> <p><i>But this acknowledgement could be stronger.</i></p>	<p>(p. 17) <i>Strength(s): ethical practice grounds the service delivery framework</i></p> <p>(p. 22) “In weighing the different options, consider three criteria: 1) the potential impact, 2) likelihood of success, and 3) resources”</p> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>could include an equity component: the potential impact overall and for specific sub-groups</i></li> </ul> <p>(p. 22) “Identifying and working with allies outside the organization could increase credibility and effectiveness through pooling of resources”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>collaboration and partnership can be important tools for mitigating inequities</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>the rationale for such activities in this toolkit does not seem to strongly include equity and social justice</i></li> </ul> <p>(p. 35) “This workshop identifies the values and beliefs which underpin the CCHN Standards (Community Health Nurses Association of Canada (CHNAC), 2003). The values and beliefs are:</p> <ul style="list-style-type: none"> <li>• Caring</li> <li>• The principles of Primary Health Care</li> <li>• Multiple ways of knowing</li> <li>• Individual/community partnership</li> <li>• Empowerment”</li> </ul> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>the message is consistent and the values and beliefs are clearly stated throughout</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>How are attitudes represented? It is not evident to the reader of this toolkit that included under these values and beliefs (embedded in the categories) are actually the concepts of equity and social justice. These might get missed, depending how well the</i></li> </ul>	<p>(p. 4) “Governments have the responsibility to provide the funding necessary to develop entry-level and continuing nursing education programs that are effective, appropriate, efficient and accessible, and that prepare registered nurses for safe and competent nursing practice”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>these actions support equity within the training system for community health nurses</i></li> <li>• <i>they also support access to different groups</i></li> <li>• <i>depending how the concepts are interpreted, they may also have equity implications through making programs effective, appropriate and efficient</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>although this is a good base to work from, the meaning of the concepts could be clarified or equity or social justice could be specifically mentioned</i></li> </ul> <p>(p. 7) The CCHN Standards Integration Process includes identifying the team and starting to organize, assessing organizational capacity (i.e., identifying those who will be affected by the CCHN Standards, seeking out resources and support and developing strategies to engage stakeholders in the process), developing the action plan in consideration of resources, taking action and evaluating.</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>this is clear and promotes action and evaluation as well as stakeholder engagement</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>could be more explicit about how this relates to, or has implications for, equity or social justice (are equity indicators parts of the evaluation framework? does equity underpin the process overall?)</i></li> </ul> <p>(p. 42, systematic reviews and best practices)</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>evidence-based decision-making to reduce bias and inequity</i></li> </ul>

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	<p><i>reader knows the actual Standards document and how often he or she refers to it.</i></p> <p>(p. 42, resources for Standard 4: Facilitating Access and Equity) Links are provided for the Health Communication Unit (THCU), health policy and sustainability</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>helpful to have the embedded links</i></li> <li>• <i>these areas are important for equity and social justice</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>appears rather limited in the interpretation of the standard</i></li> </ul> <p>(p. 53, slide 4: Why Standards?)</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>the response states that standards define the unique nature of community health nursing and this opens opportunities for further discussions about what makes community health nurses unique, what their role or position is</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>there is no specific mention of equity or social justice and this could be one of a number of key reasons why standards are important (see below)</i></li> </ul> <p>(p. 64) “Why are CCHN Standards important?”</p> <ul style="list-style-type: none"> <li>• Define scope &amp; expectations of CHN (community health nurse) practice for safe, ethical care</li> <li>• Support the ongoing development of CHN</li> <li>• Demonstrate CHN as a Specialty</li> <li>• Provide a foundation for certification as a clinical specialty with Canadian Nurses Association</li> <li>• Inspire excellence in &amp; commitment to CHN practice</li> </ul> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>this is a strong and consistent message that is clearly stated</i></li> </ul> <p><i>Area(s) for improvement:</i></p>	<p>(p. 26) This section provides suggestions on how to integrate the CCHN Standards into organizational policies and procedures: hiring policy, position descriptions or profiles, hiring interview guide, orientation material and performance appraisal</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>excellent: targets root causes of inequities such as these kinds of policies</i></li> <li>• <i>it is important to consider existing frameworks and structures</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>does not specifically mention equity or social justice as one of the rationales for doing this</i></li> </ul> <p>(p. 27) Collaboration is mentioned in all the CCHN Standards but is most prominent in standard 2: building individual/community capacity and standard 4: facilitating access and equity</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>includes specific collaborative activities and their expected outcomes, such as “works collaboratively with the individual/community”</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>could be adapted to reflect the community of interest designated in the position profile and be more clear on why collaboration might be important</i></li> </ul> <p>(p. 102, department practice standard tool) Concrete examples contributed by a health unit (e.g., “assesses, monitors, and evaluates the impact of the determinants of health for individuals – communities – populations” and “advocates for appropriate resource allocation for individuals, groups, and potential vulnerable populations to facilitate access to public health services”</p> <p><i>Strength(s):</i></p> <ul style="list-style-type: none"> <li>• <i>these are clearly linked with equity and social justice and they refer to specific actions</i></li> </ul> <p><i>Area(s) for improvement:</i></p> <ul style="list-style-type: none"> <li>• <i>when the determinants of health are mentioned, the determinants of health equity or the distribution of health could also be</i></li> </ul>

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	RECOGNITION	RESPONSIBLE ACTION
	<ul style="list-style-type: none"> <li>• <i>it could mention mitigating inequities or supporting social justice in some way</i></li> </ul>	<i>mentioned</i>

*Notes:*

1. This table is an abbreviated version of the CNA Social Justice Gauge – Version 2.0 template. See the Appendix for the full version.
2. Direct quotations from the document under assessment are enclosed in quotation marks. The reviewers' comments are italicized.

*Overall comments:*

The CCHN Standards Toolkit provides a process, tools and resources for raising awareness of the CCHN Standards and facilitating their use. The toolkit is obviously underpinned by the standards themselves, so the strength of alignment with equity and social justice within this document is closely linked to that within the Standards document. The two reviews should be read in tandem.

As in the Standards document itself, there are many places where equity and social justice could be brought out more explicitly in this toolkit. However, the material is exceptionally comprehensive in its approach to explaining the CCHN Standards and providing resources for understanding them and integrating them into multiple aspects of community health nursing. If the CCHN Standards were adapted and strengthened for more explicit alignment with equity and social justice, as outlined in the previous reviews, similar adaptations could be made to the toolkit material; this would be very useful for operationalizing these concepts. The many practical tools, such as interview guides and examples of written policies, could be especially useful to support responsible actions towards greater social justice and equity.

## References

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[eng.php](http://www.phac-aspc.gc.ca/ccph-cesp/stmts-enon-eng.php)



## Appendix: CNA Social Justice Gauge – Version 2.0 Template

Canadian Nurses Association Social Justice Gauge – Version 2.0		
<b>Social justice is equity in society.*</b>		
Consider the program, policy or product you wish to review for social justice.		
	NOTES	
	RECOGNITION	RESPONSIBLE ACTION
	How does it or does it not? Note strengths and ideas for improvement overall. <sup>12</sup>	What responsible actions are, or should be, included? <sup>13</sup>
1. Does it acknowledge that different individuals or groups occupy different positions of social advantage in society?  Yes <input type="checkbox"/> No <input type="checkbox"/>		
2. Does it acknowledge that unfair differences (inequities) exist in the opportunities and outcomes of different individuals or groups?  Yes <input type="checkbox"/> No <input type="checkbox"/>		
3. Does it acknowledge root causes of inequities?  Yes <input type="checkbox"/> No <input type="checkbox"/>		

\*Useful definitions and examples are provided after this template.

<sup>12</sup> Responses for each question can be entered into the first column under Recognition. Entries might include ideas, examples, specific facts, further questions, etc. A reviewer might reflect on what kinds of words, statements, ideas or approaches could be added. Should the program or policy be framed in a different way? Does any text require rewording, clarification or emphasis? Are there negative statements or aspects that should be omitted? Are there assumptions that should be clarified?

<sup>13</sup> There is an inherent obligation for responsible action towards the elimination of inequities. Notes about responsible actions being undertaken and/or those that should be undertaken can be entered into the second column under Responsible Action. Entries might include details or ideas about specific organizational initiatives, values or directions, non-discriminatory content or approaches, advocacy, the use of particular tools or methods, affirmative actions or targeted activities.

## USEFUL DEFINITIONS

“**Social justice**” is equity in society. It means the equitable, or fair, distribution of society’s benefits, responsibilities and their consequences. It focuses on the relative position of social advantage of one individual or social group in relationship to others in society as well as on the root causes of inequities and what can be done to eliminate them. In this view, societal benefits and responsibilities are distributed so that disadvantaged populations have priority.

“**Equity**” is fairness. When assessing equity and fairness, situations have to be judged in relation to the contexts in which they occur. If a difference between two groups or individuals is unnecessary or avoidable within a particular context it is an unfair difference or an inequity. Equitable situations are the way we can witness and measure social justice.

“**Equality**” means being equal. Equality is about equal shares and equity is about fair shares.

“**Root causes of inequities**” are socio-cultural norms and aspects of systems, structures, institutions and routines that create or sustain unfair differences between individuals or between social groups within particular contexts.

## EXAMPLES

### 1. Individuals and groups occupy different positions of social advantage in society.

Specific examples that might demonstrate **recognition** of this fact or **responsible actions** to ensure that differences are not overlooked:

- involvement or engagement of a diverse set of stakeholders
- development of appropriate partnerships
- a demonstrated concern for social inclusion
- material targeted towards disadvantaged or marginalized populations
- capacity building initiatives for disadvantaged populations
- affirmative action initiatives
- actions or content aimed at reducing unfair differences between groups or individuals

### 2. Inequities (unfair differences) exist and there is a need to support equity and fairness.

Specific examples that might demonstrate **recognition** of this fact or **responsible actions** in support of equity and fairness:

- any of the examples from question #1
- specific mention of equity, fairness or social justice
- the inclusion of equity, fairness or justice in codes of ethical practice
- the use of specific tools to ensure the fair treatment of all individuals
- focus on social determinants of health
- support for universal human rights
- evidence-based decision-making to support unbiased actions
- non-discriminatory content

### 3. There are root causes of unfair differences (inequities).

Specific examples that might demonstrate **recognition** of this fact or **responsible actions** to positively impact the root causes of inequities:

- support for just institutions and fair institutional policies and practices
- focus on changing unfair socio-cultural norms

- other work that is sensitive to equity issues and occurs at a system, structural or institutional level



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