Nova Scotia Women’s FishNet is a network of women and women’s groups established in 1995. Women’s FishNet supports women in coastal communities in their efforts to address the impact of changes in the fishing industry on women, their families and communities.

Nova Scotia Women’s FishNet promotes:
- Networking among women and women’s groups who share these concerns.
- The participation of women and the inclusion of their concerns in all aspects of decision making related to the fishery and to the sustainability of coastal communities.
- Collaborative efforts among women to develop projects and undertake activities that: address the impacts of recent policy changes on coastal communities; promote the sustainability of coastal communities; or promote the development of employment alternatives.
- Activities or projects that foster the empowerment and well-being of women in coastal communities.

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The views expressed in this document are solely those of the authors and do not necessarily represent the official policy of Health Canada.

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Good Policy, Good Health:
An Information and Action Kit for Women in Coastal Communities
Nova Scotia Women’s FishNet, Halifax, 2002

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Ann Manicom
Read This Page First!

To get the most from Good Policy, Good Health:

- **Be flexible.** There are many ways to use this Kit. You can use it yourself, to raise your awareness of the issues and guide personal understanding and action. You can read it with a friend or use it to work with a group. You don’t have to start at the front and read through to the end (although you can if you want to!). You can skip around and pick and choose the parts that will give you ideas for whatever project you’re working on.

- **Have a good look at all parts of the Kit before you use it.** There’s a lot of information tucked away inside that will come in handy when you begin to identify and address issues. For example, in Section 3, How to Take Action, you’ll find information about useful websites and information sources in the “how to” sheet titled “How to find more information.”

- **Check out Section 4 if you’re working with a group.** The material in this Kit is most effective when used in a facilitated group that offers opportunities for community discussion and collective action over a period of weeks or months. For groups with less experience influencing policy, an initial workshop can be useful for raising awareness and getting the process started. In Section 4, you’ll find advice and information for facilitators and ideas for using the materials in the Kit.

- **Be prepared to take a broad view.** The examples in this Kit are drawn from the experiences of women in coastal communities and often refer to fisheries policy. However, the principles and approaches can be applied to many different communities and issues. Some groups find it useful to compare their experiences to those of women in coastal communities.

- **Have fun!** People are happy to work on projects they find interesting, exciting and meaningful. And working with friends and neighbours can make even the most difficult tasks fun and rewarding.
Acknowledgements and thanks

This resource is the result of community-based participatory research. It is the product of the collective wisdom, effort and energy of the many women who have been equal and visible partners throughout its development and of the many women who have been involved with FishNet over the years.

In particular, the Coordinating Committee would like to thank:

- The many women who participated in the research for “Women’s Health and Wellbeing in Six Nova Scotia Coastal Communities.” This Kit is built on your insights and understanding of your communities.

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  - Nova Scotia Women’s FishNet
  - Oxfam Halifax
  - Saint Mary’s University
  - Status of Women Canada

Linda Christiansen-Ruffman, Stella Lord, Ann Manicom,
Project Coordinating Committee
Introduction

*Good Policy, Good Health* is a practical tool that has been produced through community-based participatory research. At every stage in the development of this Kit, women in coastal communities were equal and visible partners.

Many of the examples used in this Kit relate to fisheries and coastal communities. However, the information, advice and discussion points in this Kit can be useful to any group or individual who wants to understand more about health and the issues and situations that affect our health. It can also help in understanding public policy and the role it plays in improving out health or making it worse.

This Kit contains information that will help you to speak to your community and to policy makers about whatever issues are affecting your life and health. All of the materials in *Good Policy, Good Health* have been designed to be easy to read, easy to use, and easy to photocopy.

Women who have used the Kit as part of our pilot testing told us that it helped them to feel more confident and to develop the skills to write letters, to talk to people and to take action on issues and policies that were important to their health and that of their communities. The actions they took using these new skills include organizing a one-day workshop on well-being, writing a letter to their MP, and learning about fisheries license policies.

A Note on Quotes

This Kit is based on a community-based research project done by CRIAW-NS in collaboration with Nova Scotia Women’s FishNet. Women in six Nova Scotia fishing communities talked about how changes in the fishery and in their communities were affecting their health and well-being. They said that government policies in the fishery and many other areas—like EI, health services and retraining programs—were not helping and were sometimes making things worse. They also felt the policies that were affecting their lives were out of their control and they wanted change.

Throughout *Good Policy, Good Health*, we’ve used the words of these women. All of the quotes are from the research report, *Women’s Health and Well-Being in Six Nova Scotia Coastal Communities*. Throughout this Kit, this report is called “The FishNet Report.” You’ll find a copy of the complete report in Section 5.

“*What women in these communities feel about government policies could be summed up in these words: untrustworthy, controlling, unfair, detrimental to community, and unclear.*”

From: FishNet Report
Some Ideas for Using Good Policy, Good Health

As well as using Good Policy, Good Health for personal information or to inform and motivate a group, there are other ways you can spread this information around your community.

- Photocopy the information sheets from Sections 1 and 2. Leave them with politicians, public servants and community leaders at the end of meetings. Circulate them at public meetings, workshops, conferences and health fairs.

- Use the discussion points as a guide for discussions at public meeting or meetings with other groups. For example, the discussion points for the “What is Health?” in Section 2 are a good way to get community members thinking about a broader view of health.

- Donate a copy of all or part of the Kit to local libraries and schools so that students will have access to the information.

- Reprint some or all of the information sheets in community and organizational newsletters.
Section 1. Linking Problems, Policies and Health

Introduction
Factors that affect our health
Loss of control
Lack of respect
Financial insecurity
Community breakdown
Isolation
Stress

Section 2. Moving from Thought to Action

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Introduction

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How to Lobby: 1. Picking an issue
How to Lobby: 2. Finding partners and allies
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Nova Scotia Women’s FishNet 2004
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- Basic Information on Social and Economic Inclusion
- Women’s Health and Wellbeing in Six Nova Scotia Coastal Communities
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Section 1:
Linking Problems, Policies and Health
Section 1: Linking Problems, Policies and Health

Introduction
During the Spring of 1999, working with The Canadian Research Institute for the Advancement of Women, Nova Scotia Women’s FishNet interviewed women in six Nova Scotia coastal communities. The goal was to find out how their health and well-being are being affected by the downturn and changes in the fishery and by other problems facing coastal communities.

For the project, ten researchers from six communities kept journals, talked informally with people in their communities about recent changes, held focus groups with local women and interviewed individual women from their communities.

The women who participated in this community-based, participatory research identified six negative effects of public policy on their health and well-being. These were:

1. **Loss of control**: Over the fishery, their own livelihood, and over their community and community development processes
2. **Lack of respect**: From their husbands, families and government officials
3. **Financial Instability**: Income loss, income gaps; lack of jobs and opportunity; young people moving away to find opportunities
4. **Community breakdown**: Divisions between the affluent and the unemployed, between newcomers and long-time residents, between those who work in the fishery and those who don’t
5. **Isolation**: Lack of transportation, no places to get together with other women, nothing to do, loneliness
6. **Unhealthy responses to stress**: Depression, hopelessness, loss of self-esteem, increased family violence, substance abuse, drinking and gambling

Times are tough but women are tougher. For every problem they identified, the women in the FishNet project also suggested a solution—a policy change that would help improve their own health and well being as well as that of their families and communities.

Women wanted:
- Fairer and more equitable policies and programs
- To be listened to, treated with respect and included in decision-making
- Policies that support sustainable, small-scale/family-based fishing operations and employment and economic opportunities
- Policies that promote community sustainability
- Access to transportation, public spaces and recreation facilities
- Programs and services available locally, with better information about available programs and services

In this section, we make connections between these six impacts and the policies that contribute to them.
The section begins with "Factors that Affect Our Health", a discussion of the Determinants of Health. Throughout this section we use the Determinants as a framework to describe the impacts of policy on health. For this reason, it is important that those using these information sheets have some basic understanding of what the Determinants are and what they mean.

Following this we address each of the six impact areas. For each topic, you'll find an information sheet and a sheet of questions aimed at encouraging discussion. The discussion questions are formatted as an overhead or can also be used on a flipchart.

The information sheets all follow the same format, addressing a series of questions:
- What's the problem?
- Why does it affect our health?
- What policies are contributing to the problem?
- What kinds of policies could help?
Section 1: Linking Problems, Policies and Health

Factors that affect our health | Information Sheet
---|---
Discussion Points
Factors that affect our health

"... Women would be healthier and happier if there was meaningful work for their men and children, secure incomes, and public meeting places in the community for socializing and support."

This quote from the report *Women’s Health and Well-Being in Six Nova Scotia Coastal Communities* shows that women clearly understand that it takes more than doctors and hospitals to make us healthy. What happens in all parts of our lives—good and bad—affects our health. For example, we need enough money, good jobs, connection to our community and the love and support of family and friends in order to be healthy.

The factors that influence whether or not we’re healthy are called “Determinants of Health.” There are 12 of them and they’re listed on the back of this sheet.

Each of the Determinants is important on its own, but they also work together. For example, “Income and Social Status” is the single most important Determinant of Health because it relates to so many other Determinants, such as:

- **Education**—because the more money your family has, the more education you’re likely to have, and the more education you have, the less likely you are to be poor

- **Employment and working conditions**—because the more education you have, the more likely it is that you’ll have a secure, well-paying job and have some control over your working conditions

- **Health practices and coping skills**—because the more money, education and control over your work that you have, the better able you’ll be to take care of yourself and the less stress you’ll have to cope with

- **Physical environments**—because if you have enough money, you can afford good housing in a safe neighbourhood and have access to the transportation you need

- **Early child development**—because children born to mothers with low incomes are more likely to have low birth weights and to have health problems than children from high-income families

- **Gender**—because women, particularly single mothers, are more likely to be poor

What the Determinants make clear is that our health—and the health of our communities—depends not only on our biological makeup and our own individual actions but also on cooperative communities, fair employers and good government policies.
The Determinants of Health: Twelve factors that affect our health

**Income and Social Status:** The more money you have, the healthier you are likely to be. This is the single most important determinant of health. You are most likely to be healthy when you live in a place where there isn’t a big gap between rich and poor.

**Social Support Networks:** You are healthier and feel more in control of your life when you know you can count on friends and family for help in solving problems and handling hard times.

**Education:** The more education you have, the healthier you are likely to be. More education means you can get a better job with better pay and have more control over your life.

**Employment / Working Conditions:** You are healthier and live longer when you have more control over your work and less stress on the job.

**Social Environments:** You are more likely to be healthy when you live in a community, region, province or country that sticks together and works to find ways to help and support one another.

**Physical Environments:** The quality of the air, water, food and soil has an impact on your health. So do factors like housing, indoor air quality, workplace safety and the way communities and transportation systems are designed.

**Personal Health Practices and Coping Skills:** The things you do to take care of yourself and the skills you use to deal with stress affect your health. Programs and policies that make it easier for you to make healthy choices and develop skills for coping with life’s challenges are important influences on health.

**Healthy Child Development:** Things that you experience before birth and in early childhood affect your health, well-being, coping skills and competence as an adult. A healthy start is important for a healthy life as an adult.

**Biology and Genetic Endowment:** The biology of your body is a basic determinant of health. Each of us has a personal genetic make-up that can make us more or less likely to develop particular diseases or health problems.

**Health Services:** Health services play a fairly small part in your state of health. Services that contribute most to health are those that help us to stay healthy or help us to regain our health after we’ve been sick.

**Gender:** Whether you are male or female can affect your health. For example, women are more likely to face sexual or physical violence, low income and lone-parenthood. Men are more likely to die young, from heart disease, injuries, cancer and suicide.

**Culture:** Culture can affect your health, particularly if your culture is different from the overall society. You are less likely to be healthy if you are not part of mainstream society, feel that your language and culture are not valued and can’t get health care and services that are appropriate for your culture.
The Determinants of Health:

**Twelve factors that affect our health**

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Section 1: Linking Problems, Policies and Health

Loss of control | Information Sheet
               | Discussion Points
Loss of control

What's the problem?
Many of the women interviewed during the FishNet project said they felt they had lost control over many aspects of life that were important to their health and well being. These included the fishery, their own livelihood, their family and their community. Women said that their voices are not being heard when policies that relate to the future of the fishery, community economic development and the sustainability of their communities are being developed.

"DFO is taking away a way of life."

Why does this affect our health?
The health of individuals and of communities is strongly influenced by whether or not people feel in control of their lives and work. The amount of control people have is an important part of several Determinants of Health:

**Income and Social Status**
Policies that result in a loss of income have an effect on health. The less money you have the less likely you are to be healthy. One of the reasons for this is that when individuals or communities have less money, they have less control over factors that affect their health. That is, they are less able to do things like buy nourishing food or to afford good housing.

“People cannot achieve their fullest health potential unless they are able to take control of those things which determine their health.”

Ottawa Charter for Health Promotion, 1986

**Employment and Working Conditions**
You are more likely to be sick when you have a lot of stress and little control over your work. Unemployment is also bad for your health. Policies that lead to workplace instability, stress and unemployment have an effect on health.

**Education**
The more education you have, the more control you are likely to have over your work and your life. Policies that affect access to education, training and skill development have an impact on health.

**Social Environments**
Policies that result in loss of income, employment and services in a community have an effect on health because they break down the ties that bind a community together and reduce people’s ability to control their lives.
**What policies are contributing to the problem?**
The changes in fishery policy that followed the collapse of the ground fishery in the early 1990s have had far-reaching effects on the individuals, families and communities whose livelihoods depend on the fishery.

Some of these effects are obvious: there are fewer jobs in the fishery and in fish plants. Some effects are less direct:
- Because there is less money in a community, other businesses fail, people move away.
- Because there are fewer people, other services—like post offices and schools—are removed.

To make matters worse, changes to Employment Insurance policies make fewer women eligible for benefits. This in turn means that women are less likely to be eligible for the training and skills-development programs that are only open to EI recipients. Because their husbands have lost all or part of their income, more women must seek paid work. But since they often aren’t eligible for retraining, it’s more difficult for women to qualify for the few jobs available in their community.

Like fisheries policies, community development policies add to women’s feelings that they have lost control when these policies fail to recognize women’s social and economic roles in the community.

"The government has made fishermen turn into 'dog-eat-dog'. Once they would help each other, but now it's every man for himself."

**What kinds of policies could help?**
In the FishNet report, women said that they wanted fairer policies and programs that would give them more control over the decisions that affect their lives and communities. They wanted:
- Recognition for women’s contributions to the fisheries and to their communities
- Governments to respond to their concerns and to include more women in decision making

One policy direction that could help achieve these goals is Community-Based Management of the fishery. Ideally, Community-Based Management recognizes the contributions, roles and responsibilities of all people in the community and ensures that resources are managed in a sustainable manner.

Policies that include women in decision-making must be backed up by access to childcare, transportation and other supports that will allow women to participate.
Loss of control

Is loss of control a problem in our community?

What does loss of control look and feel like in our community?

What health effects are we seeing in our community as a result of loss of control?

What policies are leading to loss of control here?

What policy changes could help our community regain a sense of having some control over our lives?
Section 1: Linking Problems, Policies and Health

Lack of respect

Information Sheet
Discussion Points
Lack of respect for women and women’s work

What’s the problem?
Women bear the brunt of changes in their communities because they are the backbone of their families and communities. Women are the ones who hold things together. Policy changes in the fisheries have led to an increase in the amount of work that women do. Besides looking after their families, children, homes and household finances, many women work in the fish plants or help run fishing businesses—keeping accounts, running business errands, acting as shore captain, cleaning fish, attending meetings and doing the paperwork. On top of this, many women do unpaid volunteer work in their communities. And now, many have no choice but to look for other employment outside the fishery.

But for many women, the hardest part of all this is that few people seemed to understand, recognize or acknowledge their work. They feel that their husbands, their families and government officials don’t show them the respect they deserve.

Why does this affect our health?
Gender is a Determinant of Health. Because policies affect women and men differently, your gender can have an impact on your health. If you are female, you are more likely to earn less than a male and to have a part-time, less secure job. You’re also less likely to be eligible for training programs. Policies that result in lower income, less secure work and less education have impacts on women’s health.

What policies are contributing to the problem?
Respectful treatment and service are not always formally written into government policies.

The federal government has policies requiring that males and females be treated equally, but lack of respect for women and the work they do can be built into policies in subtle ways. A policy that defines the type and location of work that counts toward EI eligibility can overlook the kinds of work usually done by women. For example, a policy can define work done for a family business as not being "real" work—a definition that affects mostly women.

"... It was not a very pleasant experience to apply for EI benefits. HRDC does not have a great reputation for making clients feel comfortable and respected."
Even when they work for pay, women earn less than men. Policies that result in lower pay for women or that only “count” permanent or full-time paid work can also contribute to the lack of recognition for the work women do whether it is for an employer or for their families and communities. Our society values highly paid, full-time work far more than part-time, low paid or volunteer work. Since much of the work that women do is part-time, temporary or unpaid it is often not counted, valued or recognized.

What kinds of policies could help?
In the FishNet Report, women said that they wanted more respect from their husbands, their communities and from government officials.

"We are brought up thinking we have to be strong and carry the burden on our backs. There has to be a real change of attitude about getting help."

Policies that support Social and Economic Inclusion would be one step toward this goal. Social and Economic Inclusion is a policy approach that includes the entire community—even those people who are often excluded—in shaping the policies that affect their lives. Social and Economic Inclusion policies not only invite broad participation, they empower those usually excluded from participating by offering them the opportunities, resources and support they need to participate. You can learn more about Social and Economic Inclusion in Section 5: Background Material.

"Governments must take the initiative to acknowledge the various roles of women and the important contribution women make that sustains and enhances a healthy society."
Lack of respect

Is lack of respect for women and their work a problem in our community?

What does lack of respect look and feel like in our community?

What health effects are we seeing in our community as a result of lack of respect?

What policies are leading to a lack of respect for women and women’s work here?

What policy changes could help the women in our community feel that their work and contributions to the community are respected and valued?
## Section 1: Linking Problems, Policies and Health

**Financial insecurity**

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Financial insecurity

What's the problem?
Changes in the fisheries and fisheries policy mean that many people in the community can't pay their bills or find work. Financial insecurity affects women’s lives, work and family relationships. It causes stress and takes a toll on women’s health.

The women who participated in the FishNet report said that many things contribute to their growing sense financial insecurity. Incomes are declining and becoming less secure. The gaps between “haves” and “have-nots” in their community are widening. There are few jobs or opportunities available to help close these gaps and young people see no choice but to move away to find their future.

"Had the fisherman's advice been heeded, there would have been a hook and line fishery with most everyone able to participate. This would at least provide a reasonable way of life ..."

Why does this affect our health?
Financial insecurity impacts on many Determinants of Health.

Income and Social Status is the single most important Determinant of Health. The less money you have the less likely you are to be healthy. As well, the larger the gap between rich and poor in a community, the less likely it is that community members will be healthy. Policies that lead to loss or reduction of income and that widen the income gaps in a community affect health.

Employment and Working Conditions also impact on health. The less secure and more stressful your job, the less likely you are to be healthy. Policies that lead to less secure income and employment affect health.

Education has an impact on health because the more education you have, the easier it is for you to get a secure, well-paying job. Policies that limit access to retraining and skills development impact on health.
What policies are contributing to the problem?

Women identified fishery and EI policies as contributing to their families’ financial problems.

Women said that new fishing regulations mean that small fishing families have lost their livelihood. New policies that professionalize fishing, new costs and regulations, and higher license fees all make it impossible for large numbers of small-boat fishers to earn a decent living. Women also feel that the government offers ineffective and inadequate retraining programs and fisheries buyout programs.

EI policies contribute to financial insecurity because the new rules make it more difficult to qualify, especially for women. They also don't recognize women’s work in family businesses. EI, Social Assistance, CPP and Disability Benefits are now not only harder to get, but have been reduced.

For many women, all this means is that there is less money and less hope that their financial situation will improve.

What kinds of policies could help?

Women in the FishNet project said that their families would be more financially secure if policies supported sustainable, small-scale fishing operations as well as employment and economic opportunities.

According to the World Health Organization, government employment policy should have three goals:

• Preventing unemployment and job insecurity
• Reducing the hardship suffered by the unemployed
• Restoring people to secure jobs (THE SOLID FACTS 1998)

"If the government would have poured our tax dollars in the 70s and 80s into the inshore fishery instead of the offshore fishery, we’d have a stable industry now."

"Because unsatisfactory or insecure jobs can be as harmful as unemployment, merely having a job cannot protect physical or mental health. Job quality is important.”

THE SOLID FACTS, World Health Organization 1998

"In the 70s and 80s, 50% of the village was employed in fish plants. Today there isn't one person left employed in this industry ... And the same can be said for the fishermen — only one full-time fisherman and five lobster boats remain. The wharf remains empty when it seems like only yesterday there wasn't a spot to tie up a row boat."
Is financial insecurity a problem in our community?

What does financial insecurity look and feel like in our community?

What health effects are we seeing in our community as a result of financial insecurity?

What policies are leading to financial insecurity here?

What policy changes could help increase the financial security of our families and our community?
Section 1: Linking Problems, Policies and Health

Community breakdown | Information Sheet
Discussion Points
Community breakdown

What's the problem?
Women see that government policies around the collapse of the fishery are leading to the collapse of their communities.

Fish plants have closed, fishery jobs have disappeared and other businesses have closed or left. Job opportunities in most coastal communities are few or none. Young people no longer want to go into fishing and are moving away. Services are being cut back—there are fewer doctors, dentists, public health nurses, health or social services, meeting places, and recreation programs. Community services like schools, hospitals and post offices are gone or in danger of being lost. Local stores and restaurants have closed.

"When I was a child, this community had a working wharf, three stores, a restaurant and a take-out. Today the community has none of that."

Many women felt that some changes in fisheries regulations seemed designed to split families and communities. Some women lamented this loss of community spirit. Others worked hard to recreate or maintain it. But many found that even policies aimed at helping communities can cause problems.

Women said new community development programs were changing their communities and lifelong residents were not being consulted or involved. In some communities, economic development has caused divisions between local people and some wealthier newcomers. Women fear that their communities will lose their identities and heritage.

"At the table sat a self-appointed group of people—the newly formed community restoration society and their friends. Many of these people were not even community residents."

Why does this affect our health?
Our health as individuals is closely bound to the health of our communities. Policies that result in physical and social breakdown in communities affect health through several important Determinants of Health:

- **Social Environments**: We are more likely to be healthy when our community is united and able to work together to meet community needs. Policies that result in community divisions affect our health.
• **Social Support Networks:** We are healthier when we have a network of family and friends we can turn to in hard times. Policies that lead to people moving away, that increase family tension and that break up these networks, affect our health. Financial insecurity makes these efforts worse when, for example, people can no longer afford to offer to drive someone to the doctor or to a meeting.

> "I think if people start working together and supporting each other that we will slowly start seeing improvement. I think that the government should be lobbied to get some of the programs that we need."

• **Health Services,** those that prevent disease and offer support, as well as those that treat illness, contribute to our health. Policies that result in loss of services affect health.

• **Physical Environments:** Policies that lead to lack of public transportation and the loss of public spaces—for example through lack of maintenance—lead to community breakdown and affect our health.

• **Education** is an important Determinant of Health—the more education we have, the more likely we are to be healthy. Policies that result in school closures not only affect access to education, they remove an important community focus, contribute to community breakdown and affect our health.

• **Healthy Child Development,** particularly during pregnancy and early childhood, affects health. Removal of health services from a community makes it more difficult to get good prenatal care and removes birth from the community. This contributes to community breakdown as well as making children less healthy.

**What policies are contributing to the problem?**
Fishery policies have had a huge effect on both the economic and social life of coastal communities. They have created deep divisions on issues related to the fishery. Policies resulting in the loss of employment in the fishery and loss of income in the community have led to the closing of community-based stores and businesses. Changes in EI policies have further weakened communities already hurt by fisheries policies. Provincial policies that remove and reduce health and social services and close local schools also weaken communities. Community Economic Development policies create conflict in communities when they do not specifically support participation by women and long-time residents.

**What kinds of policies could help?**
Communities would be strengthened by policies that focus on the needs of coastal communities and support:

• Small scale fishing families and communities
• Access to public spaces, recreation and public transportation
• Developing community centres or other public places for classes, recreation, meetings and social gatherings
• Vital community services and facilities like schools and post offices
• Better employment opportunities for women in their communities
• Community Development initiatives that involve women and recognize their role in communities

> "We would like to see a bus service, some exercise classes, a gym, jobs, a recreation center and a little more thanks for what we do."

**Community breakdown**

**Information Sheet**
Nova Scotia Women's FishNet 2004

**Linking Problems, Policies and Health**
Is community breakdown a problem here?

What kinds of community breakdown are we seeing?

What health effects are we seeing in here as a result of community breakdown?

What policies are leading to the breakdown of our community?

What policy changes could help rebuild our sense of community?
Section 1: Linking Problems, Policies and Health
Isolation

What's the problem?
Women in coastal communities say that they feel increasingly isolated and alone, both in their communities and in their families.

In their communities, there are few places where they can get together with other women and few opportunities for social activities, fun or learning. Many say that they have no place to go, and because of the lack of public transportation, no way to get there anyway.

Women say that within their communities, people are becoming more and more cut off from one another and that divisions have developed between neighbours. Women whose families are having a hard time say that they've lost their pride and feel that they no longer have anything to offer their community. They cut themselves off from their communities because they can’t “hold their heads up.”

Within their families, women are often isolated by their husband’s dependency and depression. Women in stressful or abusive situations are further isolated because they are not used to needing help and are embarrassed to ask for help or admit their problems. Lack of services that could help women deal with their problems makes the isolation worse.

"It's pretty hard to get people to come into the house and talk to you about problems and stuff because of the domineering males. They just wouldn't allow people to come in. And then the women find it difficult to get out because they won't allow them to go to these meetings or participate in things. They want them under their thumbs."

Why does this affect our health?
Policies that isolate people from their natural sources of support have a serious affect on health. Some of the Determinants of Health affected by isolation are:

- **Social Environments**: Living in a “cohesive” community—one that sticks together and works as a unit for the good of all—makes an important positive contribution to our health. Policies that divide communities increase isolation and have a negative impact on health.

- **Social Support Networks**: The friends and family we turn to for help and support are essential to our health and well-being. Policies that pit family and community members against one another or isolate them from one another, affect our health.

“Social support and good social relations make an important contribution to health. Social support helps give people the emotional and practical resources they need. Belonging to a social network of communication and mutual obligation makes people feel cared for, loved, esteemed and valued. This has a powerful protective effect on health.”

THE SOLID FACTS
World Health Organization 1998

Isolation
Information Sheet

Linking Problems, Policies and Health
Nova Scotia Women's FishNet 2004
• **Physical Environments**, such as public meeting spaces and transportation systems, break down isolation by enabling people to get together. Policies that weaken or remove these contribute to isolation and affect our health.

• **Gender**: Isolation makes women even more vulnerable to abuse. Policies that break down social support networks and remove support services have a serious effect on women’s health.

**What policies are contributing to the problem?**

Many different policies contribute to the isolation of coastal communities and the isolation of the women who live in them.

• Fisheries policies that pit different groups against one another
• Cutbacks in services that leave women with no place to turn for help
• Federal and provincial government policies that allow the closing of community meeting places, post offices and schools
• Policies that remove support from groups who offer local recreational and social programs
• Policies that make public transportation less accessible

“A ‘sink or swim,’ ‘divide and conquer’ scenario prevails whereby people are disconnected from and pitted against each other. Some people thought that this was part of a deliberate government strategy to downsize, download, regulate and control.”

_FishNet Report_

**What kinds of policy changes could help?**

Isolation could be reduced if public policies:

• Provide resources to support women’s activities. For example, policies that promote access to transportation and public spaces make it possible for women to get together.
• Create or restore community meeting places, recreation facilities and centres (like post offices and schools).
• Encourage cooperation and mutual support rather than competition and division in Community Development and Fisheries Management programs.
• Support accessible local services—such as women’s centers and transition houses—and provide resources to help women who face barriers to accessing these services.

"There is our local women's group ... with about 18 members. We get together every now and then just to talk and unwind. When the night is over you feel so relaxed it helps you to cope with just about anything life throws your way for a little while."
Isolation

Is isolation a problem in our community?

What kinds of isolation are we seeing and feeling in our community?

What health effects are we seeing in our community as a result of isolation?

What policies are leading to isolation in our community?

What policy changes could help reduce isolation and rebuild our sense of belonging and connection?
Section 1: Linking Problems, Policies and Health

Stress
Information Sheet
Discussion Points
Stress

What's the problem?
All of the issues we talk about in this kit—loss of control, lack of respect, financial insecurity, isolation and community breakdown—increase the amount of stress in women's lives.

Women identified many sources of stress:
- Increased workloads
- Few job opportunities and low pay when a job was available
- Trying to manage on lower family income
- Family tensions, especially trying to cope with a husband’s unemployment and depression
- Increased family violence and abuse
- Isolation and divisions in the community
- Feeling incompetent because they are unable to keep up with the constantly changing fisheries rules and regulations

"Women hate what the stress is doing to them and to their husbands."

All this stress can lead to a range of mental health issues. These include depression, hopelessness, lack of self-esteem and self-confidence, and even suicide.

Stress by itself can have a bad effect on health, but its effects are worse when our ways of handling it produce even more stress. Unhealthy responses to stress—like physical and mental abuse, family violence, alcohol and drug use and gambling addiction—do more to cause stress than to ease it.

Cutbacks in the services that could help women cope with the impact of stress on their lives and communities make all these problems even worse.

"You have a heavier workload and a heavier stress load. Sometimes you forget that you are a human being. You forget to take care of yourself. You are like a machine. You wake up in the morning and your button is turned on. You go do what you have to do all day long and you fall into bed at night. And when you try to close your eyes, the wheels are still turning. Your body and soul never get a rest."
Why does this affect our health?

Our bodies have a physical response to stress and people with high levels of stress are more likely to get sick. Stress also affects:

Personal Health Practices and Coping Skills:
People under long-term stress are less likely to take care of their health and more likely to turn to drugs, alcohol or gambling as a way to cope. Women said that their husbands were drinking more because they had a lot of time on their hands and were stressed and depressed. Wives and mothers suffer great stress because the burden on family problems falls on their shoulders.

Health Services: Policies that cutback health and support services or increase the cost of services have an impact on health.

Gender and Healthy Child Development: Studies show that when a man loses his job, the stress causes the health of his wife and children to get worse. As well, women are more vulnerable to the increase in physical and mental abuse that is occurring as more men are “stuck at home.”

What policies are contributing to the problem?

Women blamed the increased stress in their lives and communities on changes in the fishery and fisheries policies, as well as on changes in EI and other policies. These policies affect their own and their husbands' work, income, and place in the community. They have created enormous stress in families and communities. Policies that have led to cutbacks in health and social services and to the loss of community anchors like post offices, stores and schools have added still more stress.

What kinds of policy changes could help?

Women identify fishery policies as the root causes of their stress. Changes in these policies would lead to healthier individuals and communities. Stress could also be reduced by policies that support:

- Accessible and affordable local programs and services
- Better access to information about available programs and services
- Women’s equality and participation
- Social and Economic Inclusion

"Our self-worth and self-esteem are hitting rock bottom. We all have to pull together and fight for our heritage and for what is rightfully ours."

"We need to pamper, love and help ourselves, our souls and our spirits."

THE SOLID FACTS
World Health Organization 1998
Stress

Is stress a problem in our community?

In what ways are we seeing and feeling the effects of stress in our community?

What health effects are we seeing in our community as a result of stress?

What policies are increasing the amount of stress in our community?

What policy changes could help reduce the levels of stress in our community?
Section 2:
Moving from Thought to Action
Section 2: Moving from Thought to Action

Introduction
In Section 1 we looked at the issues that FishNet members identified as having negative effects on their health and related them to the Determinants of Health and to the policies that caused problems or made them worse.

But government policies don't always create problems. Good public policy can help make things better. As you saw in Section 1, the women in the FishNet study had plenty of ideas about policies that would help.

After going through Section 1, your group probably has lots of ideas, too.

Once people have thought about and recognized the many ways in which policies affect their health and communities, they begin to wonder what they can do to change the situation.

Before they start taking action however, it's helpful to have a firm grasp of some basic concepts that they will be addressing. These are:

- What is health?
- What is policy?
- How does policy affect health?

In this section, each of these topics is addressed through an information sheet, a discussion sheet and notes for use on an overhead or flipchart.

Information sheets describe each topic, offer supporting information and provide the basis for group discussion.

Discussion points provide a story, activity or other information that is intended to encourage discussion and move people towards thinking about action.

Overhead/Flipchart notes contain key points from the Information sheets. They are formatted so that, to use them as overheads, all you need to do is copy them onto transparencies. They can also be rewritten onto flipchart pages.

The section concludes with a Community Action Sheet titled "What can we do?" This sheet describes some of the actions the women who participated in the FishNet project wanted and starts a discussion on how to move toward achieving some of them.
Section 2: Moving from Thought to Action

What is health?

Information Sheet
Discussion Points
Overhead/Flipchart Notes
What is health?

“Health” can be a slippery word. When we think about it at all, most of us think that if we haven’t got an actual illness, we must be healthy. But while not being sick is surely part of being healthy, it’s not the only part.

The World Health Organization (WHO) takes a broader view. They say that health is “a state of complete physical, mental, spiritual and social well-being and not merely the absence of disease.”

This makes sense when you think about the times in your life when you felt really good—really healthy. You probably weren’t sick but you also probably felt connected to the people around you—your family, friends and community. You felt loved, cared for, hopeful and able to do the things you wanted to do in your life. That’s what it means to be in “a state of physical, mental, spiritual and social well-being.” That’s what it means to be healthy.

It also means that your health doesn’t depend only on your genetic background or on what you do individually to take care of your health. Eating well, exercising and taking care of yourself are important, but your health as an individual is tied up with the health of your family and community.

You’ve probably heard the saying, “If you have your health, you have everything.” That becomes even truer when you look at health in the broad sense as a resource that enables you to learn, grow, reach your goals and feel in control of your life.

"Women recognized that their health is very dependent on the security and well being of the larger community and of their families."

~FishNet Report
Health is something that people make together. The Ottawa Charter for Health Promotion says it very well:

"Health is created and lived by people within the settings of their everyday life; where they learn, work, play and love. Health is created by caring for oneself and others, by being able to make decisions and have control over one's life circumstances, and by ensuring that the society one lives in creates conditions that allow the attainment of health by all its members."

**How healthy are we really?**

*In the 1995 Nova Scotia Health Survey, 92% of Nova Scotians reported that they were satisfied with their health.*

*But are we really as healthy as we think we are?*

*In the National Population Health Survey (1995) only 59% of Nova Scotians rated their health status as “very good” or “excellent.” Only New Brunswick and Saskatchewan have smaller percentages.*

*Nova Scotia has Canada’s highest rate of people who are at risk for clinical depression.*

*We have the highest rate of people with a health limitation or disability.*

*We have the highest level of people reporting high work stress.*

*Nova Scotians have the second highest rates of high blood pressure and high stress.*

*And finally, Nova Scotia’s rates of smoking and overweight are among the highest in Canada.*

Population Health Research Unit
http://www.medicine.dal.ca/phru
Thinking and talking about...

What is health?

When people get together, they talk. And when they talk, they tell stories.

One way to get people thinking and talking about health—and to help them connect their own health to the health of their communities—is to give them a chance to tell stories.

Most of us are far more used to talking about illness or injury than about health—we all have stories about when someone broke her leg or had a heart attack or got whooping cough on a Sunday night during a February snowstorm. The key to this kind of discussion is to encourage people to talk about HEALTH and to use their stories as a bridge to thinking about what helped them feel healthy and what needs to happen for them to feel healthy again.

• Get a group of people together. Friends, family, a church group, people you play cards with—any group will do.

• Ask for volunteers to tell about a time in their life when they felt really healthy—well and strong and full of life.

• After each story, ask the speakers to try to remember what was happening in their life at that time. Where were they living, what were they doing, who was around them? What was going on that helped them feel healthy?

• Start making a list of the things that made people feel healthy. A happy home, having friends around, a good job, being in school, feeling they were part of a group or community—just list whatever people say.

• Read out the list and ask everyone to think about what needs to happen for them to feel healthy again. What needs to change? What can they each do, or all do together, to start making changes?
What is health?

The World Health Organization (WHO) says:

"Health is a state of complete physical, mental, spiritual and social well-being and not merely the absence of disease."

The health of individuals is tied up with the health of their family, friends and community.

"Women recognized that their health is very dependent on the security and well being of the larger community and of their families."
Section 2: Moving from Thought to Action

What is policy?

Information Sheet
Discussion Points
Overhead/Flipchart Notes
What is policy?

“A policy is a plan of action agreed to by a group of people with the power to carry it out and enforce it.”

Capacity Building: Linking Community Experience to Public Policy

Policies can be laws, rules, regulations, guidelines, principles or directions. They say what is to be done, how it is to be done and for (or to) whom it is to be done.

The world is full of policies. Individual agencies make policies that guide the way they operate. Stores have return policies. Workplaces have policies about things like sick days. Schools have policies that describe the way they expect children to behave.

All levels of government make policies.
- The federal government makes policies about things like fisheries, trade and employment insurance.

- The provincial government makes policies about who can get certain health services and where schools, hospitals and highways will be located. The provincial government also delegates its policy-making authority to other agencies or organizations such as School Boards and District Health Authorities.

- Local governments make policies about where you can build houses, park cars or let dogs run loose.

The policies that governments make are called “public policies.” They have a huge impact on individuals and communities because public policy decides how resources are divided and how and where public money is spent.

Ideally, public policies are developed with the cooperation of many people:
- Elected politicians who set the policy
- Bureaucrats who develop regulations to carry out the policy
- Managers and service providers who carry out the regulations
- People who are affected by the policy

"The government makes fisheries laws without consulting the fishermen. Whoever makes these policies doesn't know one fish from the other."
Policies usually reflect the beliefs, values and experiences of the people who make them and the way governments work. In our less than ideal world, the people who will be most affected are often left out of the policy-making process. The result is that the people affected by a particular policy feel frustrated and angry because the policies that govern their lives and livelihoods do not reflect their values or experience.

Good public policy reflects the values and experiences of the people it affects. Because public policy has such a profound impact on communities, community voices—from women as well as men—need to be part of its development.

Women's voices are often left out of the participatory process. This is because they are less likely to hold positions of power and authority in government or elsewhere. Even when there are public consultations with stakeholders, it is often difficult for women to bring their own concerns to the table because of lack of time, social isolation or lack of supports (like child care and meeting places) that would help women to organize.

It takes time and energy for individuals, communities and policy makers to learn to work together. But it is the only way to ensure that policies affecting communities support community values and reflect community experiences.

"Never doubt that a small group of thoughtful and committed citizens can change the world. Indeed, it is the only thing that ever has." ~Margaret Mead
Thinking and talking about...

Policy

Identifying the Policy that’s Causing the Problem

Many of the policies that affect health are not actually health policies. Fisheries policy, economic policy, social policy and policies in many other areas can also affect health. Before you can change or influence policies that affect your health, you need to know what policy is causing the problem and to be able to make the links between the policy and the problem.

Making links can take practice. Sometimes the links are not clear or they get tangled up in other problems. But by working through the tangles, you’ll be able to see the connections more clearly. And that’s the first step toward being able to make the connections clear to others and to begin to change the policies that are causing the problems.

• Get together with a group of friends or people you feel comfortable with.

• Think about some of the health problems that your community has experienced over the last few years. For example, increasing depression, stress and other mental health problems, family violence, or addictions (to gambling, drugs or alcohol).

• Now work back from the impact to the policy that triggered it. For example:

  **Family violence seems to be increasing.** You are hearing more about wives in your community being abused by their husbands.

  A lot of this abuse seems to happen when husbands have been drinking.

  Men are drinking more because they are feeling useless and depressed.

  They feel depressed because they’ve lost their jobs and their self-esteem.

  The job loss was **caused by fisheries policies.**
What is policy?

A policy is a plan of action agreed to by a group of people with the power to carry it out and enforce it.

Policies say what is to be done, how it is to be done and for (or to) whom it is to be done.

Good public policy reflects the values and experiences of the people it affects. Because public policy has such a profound impact on communities, community voices—including women's voices—need to be part of its development.

"The government changed the rules and that changed everybody."
Section 2: Moving from Thought to Action

How does policy affect health?

Information Sheet
Discussion Points
Overhead/Flipchart Notes
How does policy affect health?

When asked about how their communities had been affected by changes in the fishery, women interviewed for the FishNet project blamed government policies and the lack of consultation. They saw that government policy had affected their health and the health of their families and communities in many ways.

The policy impacts women identified connect with 11 of the 12 Determinants of Health. The only Determinant not directly affected by public policies is genetic and biological endowment.

<table>
<thead>
<tr>
<th><strong>Policy Impact</strong></th>
<th><strong>Determinant of Health Affected</strong></th>
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<tbody>
<tr>
<td>Their families were less well-off financially and there were growing gaps between people in their communities who had jobs and money and those who didn’t.</td>
<td>Income and Social Status</td>
</tr>
<tr>
<td></td>
<td>Healthy Child Development</td>
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<tr>
<td>They were seeing more family tensions and break-ups and were feeling more alone.</td>
<td>Social Support Networks</td>
</tr>
<tr>
<td></td>
<td>Healthy Child Development</td>
</tr>
<tr>
<td>Retraining programs weren’t helpful or weren’t available.</td>
<td>Education</td>
</tr>
<tr>
<td>There were no jobs and few opportunities for themselves, their husbands or their children.</td>
<td>Employment and Working Conditions</td>
</tr>
<tr>
<td>Their communities were breaking down. Young people saw no future for themselves in their communities and were worried about what they saw happening to their families, their schools and their friends.</td>
<td>Social Environments</td>
</tr>
<tr>
<td>Fishing as a way of life and its rural culture were under attack.</td>
<td>Culture</td>
</tr>
<tr>
<td>They were trapped by lack of transportation.</td>
<td>Physical Environments</td>
</tr>
<tr>
<td>They were seeing (and feeling) more stress, depression, abuse, gambling, and drug and alcohol use.</td>
<td>Personal Health Practices and Coping Skills</td>
</tr>
<tr>
<td>The health and social services their communities once had were being cut back or lost.</td>
<td>Health Services</td>
</tr>
<tr>
<td></td>
<td>Healthy Child Development</td>
</tr>
<tr>
<td>As women, they were working harder and feeling the stress of trying to hold everything together.</td>
<td>Gender</td>
</tr>
</tbody>
</table>

"I wonder how these policy makers sleep at night when they know they are directly responsible for the many bankruptcies, suicides and family break-ups?"
Because the Determinants of Health are all connected, when one factor is badly affected by policy, the ripples can affect many other aspects of health. For example, when fisheries policies result in loss of jobs and income or when education policies result in school closings, individuals, families and communities are affected in many ways.

But it can work in the other direction, too. The ripples from policies that help one Determinant will also help others. For example, economic policies that focus on community development and job creation will have good effects on many aspects of physical and mental health and will improve the future prospects for children and for the communities where they live.

It’s easy to see that health policies can have an impact on our health. It’s just as important for all of us to understand that many other kinds of policy can also have an effect—for good or bad—on our health and the health of our families and communities.

“It seems that government policies are either destroying the community (like dismantling the public wharf and the post office and sending patients home sicker and quicker) or policies and services that exist to support communities are inaccessible to those who could use them.”

“Recognizing the health impact of economic and social policies could have far-reaching implications for the way society makes decisions about development, and it could challenge the values and principles on which institutions are built and progress is measured.”

World Health Organization
THE SOLID FACTS
Thinking and talking about…

How policy affects health

Because the Determinants of Health are all connected, when one factor is badly affected by policy the ripples can affect many other aspects of health. For example, when fisheries policies result in loss of jobs and income, local businesses and services close, people move away and the fabric of a community begins to fall apart.

But policy can work in the other direction, too.

The ripples from policies that help one Determinant will also help others. For example, economic policies that support community development and job creation can bring people back to a community, give young people a reason to remain, and provide a reason for services to return.

• Invite a few people whom you like and are comfortable with to come over and talk about how to start addressing health issues in the community.

• Ask people to talk about:
  What kinds of new policies would have a good effect on our health and the health of our community?

  What changes to existing policies would have a good effect on our health and the health of our community?

• Make a list of the policies and policy changes they suggest.

• Go over the list together and pick one policy change that you’d like to work toward as a group.

• Decide on a first step you’ll take toward addressing this issue. This can be a small step. For example, you could decide to talk to other community members to get more help. Or you could decide to continue meeting and work together to get more information about your issue.
How does policy affect health?

Women’s observations about the impact of government policies and the Determinants of Health these policies affect.

Their families were less well off financially and there were growing gaps between people in their communities who had jobs and money and those who didn’t.

Income and Social Status
Healthy Child Development

They were seeing more family tensions and break-ups and were feeling more alone.

Social Support Networks
Healthy Child Development

Retraining programs weren’t helpful.

Education

There were no jobs or opportunities for themselves, their husbands or their children.

Employment and Working Conditions

How does policy affect health?
Moving from Thought to Action
Overhead/Flipchart
Nova Scotia Women's FishNet 2004
How does policy affect health? (continued)

Women’s observations about the impact of government policies and the Determinants of Health these policies affect.

Their communities were breaking down. Young people saw no future for themselves in their communities.

Fishing as a way of life and its rural culture were under attack.

They were trapped by lack of transportation.

They were seeing (and feeling) more stress, depression, abuse, gambling, and drug and alcohol use.

The services their communities once had were being cut back or lost.

As women, they were feeling the stress of trying to hold everything together.
Section 2: Moving from Thought to Action

What can we do?

Discussion Points
What can we do?

Once you’ve identified a problem and begun to sort out the policies that are contributing to it, the next step is to do something about it.

In the FishNet report, women named several things they’d like to do to in their communities.

- Develop a woman’s centre or other place to go for social support.
- Increase public awareness about issues affecting women and coastal communities.
- Share information with other centers, programs and groups.
- Promote services and organize groups that help women cope with stress and increase their self-esteem.
- Get more involved in the decision-making and policy-development process at local, regional, provincial and federal levels.
- Organize lobbying and advocacy efforts to change policies.
- Develop partnerships and work with other groups who share our goals.
- Help women in coastal communities develop the knowledge, skills and organizational ability that will help them achieve their goals and improve their health and well-being. Ask your group to think about these possibilities, select the one (or more) that they think will work for them, and decide on how to do it in their community.

Ask the women in your group to think about what needs to be done in their community. Would one of these ideas work for them? Or, do they want to do something entirely different?

Discuss:
- What would you like to do?
- What resources would you need?
- What skills does your group bring to the effort?
- Who else in your community could help?

What should you do first?
This discussion can help your group begin to develop a goal and start planning how they will work toward it. In Section 3, you’ll find a series of "How To" sheets that can help your group build on or develop some of the skills they might need.

"The only way anything will change is if we work together, stick together, take a stand, and let the government know we're here!"

"When you are way down there, there are only two places to go— either out of this world or start climbing back up. Women are starting to get stronger, to say 'no more.' "
Section 3. How to Take Action

Introduction
Once your group has decided to take action to address one or more of the policies that affect their health and their community, they may find that they need to build on their existing skills or develop some new ones.

In this section, we offer two sets of "How to" Sheets that will help you to reach your goals.

"How to Lobby" Sheets take you through the five basic steps of effective lobbying.

- How to Lobby 1: Picking an issue
- How to Lobby 2: Finding partners and allies
- How to Lobby 3: Deciding who to lobby
- How to Lobby 4: Planning your strategy
- How to Lobby 5: Implementing your strategy

We've chosen to focus on lobbying skills because participating in policy development will almost certainly involve lobbying. As well, lobbying offers many opportunities to develop and practice a range of useful skills.

Lobbying is political persuasion. When you lobby, you are trying to persuade politicians (who make policy) or bureaucrats (who recommend and carry out policy) to see things your way. To lobby effectively, you need a range of skills.

"How to" Sheets offer basic information on a few generally useful skills.

- How to...Build good working relationships
- How to...Plan and make effective presentations
- How to...Let people know about your issue
- How to...Get the most from meetings with politicians
- How to...Find more information

In Canada, the goal of lobbying is to influence public policy. Policies will only change when the people who are affected by them take action to change them.
Section 3: How to Take Action

"How to Lobby" Sheets

How to Lobby 1: Picking an issue
How to Lobby 2: Finding partners and allies
How to Lobby 3: Deciding who to lobby
How to Lobby 4: Planning your strategy
How to Lobby 5: Implementing your strategy
How to Lobby:

1. Picking an issue

Sometimes we get to choose the issue we'll be lobbying about. Other times the issue picks us. For example, when a policy is announced that you think will have very bad effects of your community, you have no choice but to lobby to get it changed.

Usually, though, we have a certain amount of choice. For example, most groups come together because they share the same goals or values—for example, they want to bring more jobs to their community or to start a women's centre. These groups lobby for policies that will help them reach their goals.

To lobby effectively:

✓ You need an issue you are comfortable with.
   While you’re lobbying, you and your group will be spending a lot of time with this issue. Be sure that everyone in your group agrees that the issue is important and supports the approach and solutions you are proposing.

✓ You need an issue you can find information about.
   Remember, lobbying is political persuasion. You will need to have facts, figures and background information in order to make your points persuasively.

✓ You need an issue that other people and groups will also support.
   This is important for three reasons:
   - Many hands make light work and lobbying can be a lot of work.
   - Lobbying (as we've said before) is political and politics is a numbers game. The more people who can be shown to support an issue or idea, the more favourably politicians will consider it.
   - More people mean more ideas, more skills, more experience, bigger networks and more resources.

✓ You need an issue you can state in a way that makes lobbying possible. Many times we get involved in lobbying when something happens to us personally or to someone in our family. For example, you are turned down for a retraining program that you need to get a job. As long as the issue is, “I couldn’t get into the retraining program” it’s a personal problem. If you can make the issue into a policy problem, then you can lobby for policy change. For example, “EI policies make it difficult for women to get retraining. Their rules don’t count the kind of work women do and so many women are not eligible.” Now you can lobby for changes in the policies that are the cause of the problem.
You need an issue that leads to a goal.
The most effective lobbyists are those who are clearest about what they are working to accomplish. Once you have an issue, you have to decide what you want to accomplish. You need a goal.

Suppose you choose the issue we used above: “EI policies make it difficult for women to get retraining because their rules don’t count the kind of work women do. That makes many women ineligible.” What policy changes would help remedy the problem? Once you know the changes you want, you can lobby to get them. Achieving these changes becomes your goal.

Some goals will be very big and will take a long time to accomplish. In this case, you can break them down into smaller, short-term goals. That way, each time you achieve a short-term goal, you’re a step closer to reaching your long-term goal. For example, your long-term goal might be to change EI policy so that more women are eligible for retraining programs. Your short-term goals might be:

- To find out what other organizations, such as unions or women’s groups, have been suggesting as changes to EI policies.
- To meet with your MLA and MP to state your case and get their support
- To get one of your members appointed to any committees that might be formed to look at EI policies

Celebrating when you reach each short-term goal can help maintain your group’s energy and commitment and build momentum that will carry you closer to your long-term goal.
How to Lobby:

2. Finding partners and allies

The more people you have on your side, the easier and more effective lobbying will be.

Partners and allies strengthen your efforts in several ways:
- By bringing resources and skills your group might not have
- By offering encouragement, energy and moral support
- By sharing new ideas and perspectives
- By increasing the number of your supporters

This Kit is about the impacts of public policy on health. The policy that is affecting your health could come from any number of places—for example, your community council, the provincial Department of Education or the federal Department of Fisheries and Oceans. So your partners could be different, depending on the issue you choose and the target of your lobbying effort.

Once you’ve identified your issue, you can look for partners who share your concern. You may want to consider starting a new group or forming a coalition of existing groups.

Think about:
- What other groups are interested in our issue or issues like ours?
- What resources and skills do they have? What strengths can we offer them in return?

Possible partners and allies include:
- Local people who share your concern
- Other groups working on similar issues—for example, fisheries issues, health issues or community economic development. Depending on the policy and target of your lobbying, these could be local, provincial, regional, national or international groups
- Researchers or professionals working in your area of interest
- Local businesses
- Church groups
- Local health groups—for example, your local Community Health Board
- Service clubs
- Women’s groups
- Advocacy groups
- Social justice and equality-seeking groups
- Unions
- Professional and trades groups
You can connect with potential partners by:

- Talking to people you meet at conferences, workshops and meetings.

  By talking about your group and letting people know what you do. Once they know about you, partners may find you!

- Listening to others talk about their group. You may find that you can help each other lobby

- Making presentations to other groups, organizations and agencies

- Volunteering to participate in committees and working groups

- Partnering with other groups to help with their lobbying efforts

Whenever you meet someone who shares your group’s interests, be sure to get contact information so you can keep in touch. Be sure you give your information so they can get in touch with you, too.
How to Lobby:

3. Deciding who to lobby

Picking the right target is important. Lobbying the wrong people is useless, discourage and a waste of time and resources. If you lobby the wrong person you can’t succeed for the simple reason that the person you’re lobbying isn’t the one who has the power to give you what you want.

The more clearly you have defined your issue and your goal, the more clearly you will be able to see where you should direct your lobbying effort. Ask yourself:

| Is the policy you want changed federal, provincial or municipal? |
| Who has the power to change the policy? (This is probably a politician or cabinet minister.) |
| Who does this decision-maker listen to? (This is probably a public servant.) |
| What is the chain of command? Who is the best person to approach first? |
| Who is in charge of developing or implementing the policy you’re concerned about? |
| Can you identify any allies among the politicians or public servants who are likely to be responsible for implementing the policy? Sometimes it can be very helpful if you can find a politician or public servant who agrees with your position. |

It can take time and effort to find the answers to these questions. This is one of the times when partners and allies can be a big help. They may have information or experience that will allow you to target your lobbying efforts on the people who are in a position to help. They might also support your lobbying efforts.
How to Lobby:

4. Planning your strategy

Once you’ve chosen your issue, lined up your allies and decided who to lobby, you need to develop a plan of action. You need to think about:

- WHAT you’ll do—**strategy**
- WHEN you’ll do it—**timing**

**Strategy**

Your strategy will depend on what you are trying to achieve and who you are lobbying.

Your strategy will be based on the answers to these questions:
- What do we need to do to accomplish our short-term goals?
- What do we need to do to accomplish our long-term goals
- What should we do first? What next?

Your strategy should be flexible enough to adapt as you identify new allies, new opportunities arise and the situation changes. And it will change, because just by participating in the process, you are causing change.

"Successful campaigns change all the time because changing people's minds is usually the objective."

—Penny Kome

Your strategy also needs to consider who you will be lobbying. Elected officials and bureaucrats each respond best to different approaches. For example, elected officials depend on voters. Politicians want to know if doing what you are asking will help them get elected. They are often more responsive to approaches that involve tactics like publicity, political pressure and petitions—approaches that emphasize the number of voters who support your position.

These kinds of public tactics won’t work as well with public servants—bureaucrats, administrators and other non-elected officials. Public servants need to understand what you want and what you want them to do about it. They must know that your argument is valid before they can recommend it to their superiors. Meetings where you offer facts, background information and supporting materials are effective approaches. So is participating on committees where you would be working directly with public servants.

Another part of your plan should look at barriers you might face while lobbying. You’ll need a plan to deal with barriers like lack of time, money, energy, childcare and confidence.
You also should expect some resistance from the people you will be lobbying and maybe even from people you thought would be on your side. Whenever you lobby, you are lobbying for two things—a particular issue and to become part of the decision-making process. The very fact of your participation changes things, and many people instinctively resist change. You will have to earn respect and show the value of your contributions. So don’t be surprised when you come up against a barrier, don’t take it personally and don’t give up!

**Timing**

Lobbying can be a long process. You spend a lot of time doing groundwork—researching your issue, going to meetings, talking to people in your community, gathering support and making contacts.

Some short-term, time limited events offer special opportunities for lobbying. These can arise without much notice and when they do, you need to be ready to take advantage of them. The down side is that these opportunities require intense activity. Lobbying opportunities include:

- Election campaigns
- Public hearings on your issue or one related to it
- Hearings by committees or task forces studying policy related to your issue
- Legislation being written that will affect your issue

Once you begin lobbying and making contacts, you’ll start to find many opportunities to make your points and learn many effective ways to do it. Experience is the best teacher.
How to Lobby:

5. Implementing your strategy

You’ve chosen your issue, defined your goals, lined up your partners, decided who to lobby and made your plan. Now you implement your strategy.

The first step in putting your lobbying strategy into action is to decide who will do what jobs.

For example, if your strategy includes meeting with your MLA, you need to know who will:

- Write the letter asking for a meeting
- Follow up the letter with a call to arrange a meeting time
- Decide what your group wants to say at the meeting
- Decide who will say what
- Decide who will write the follow-up letter after the meeting

Every task needs to have someone who has agreed to do it and a date when it will be done. People are most likely to do jobs that they are good at, so it’s to everyone’s advantage that each task goes to someone who wants to do it and knows how to do it. This is another time when having partners is a great advantage. With a pool of several groups you’re more likely to find the various skills you need.

You can use many different tactics to carry out your lobbying strategy. These include:

- Meetings with officials
- Telephone calls
- Contact at social events—community picnics, receptions, etc.
- Public meetings
- Petitions
- Press releases
- Participation in advisory committees
- Presentations to task forces and committees
- Mass mail, fax and e-mail campaigns
- Writing and submitting a brief—a formal paper that explains what you want and why you think it’s important

In fact, lobbying is a great opportunity to learn new skills. It can be very effective if you pair people who have particular skills with others who want to learn those skills.

Lobbying requires a lot of coordination and communication among all the partners involved, so it can be helpful if one person agrees to be the “lead” on each part of the strategy. This person can keep track of who’s doing what and keep things on schedule.
As you implement your lobbying strategy, remember:

**Apply pressure as needed.**

Sometimes it works best to start slowly and gradually build up pressure as you need to. For example, if your MLA is willing to meet with you, do it before organizing public meetings. This is effective for several reasons:

- It conserves your group’s energy and resources. Organizing demonstrations and getting lots of people out for public meetings takes effort and energy. Why do it if you don’t have to?
- It gives you a chance to get to know the person you’re lobbying and present your case in a calm and positive atmosphere. If the person you’re meeting with is uncooperative or doesn’t take you seriously, you can still apply public pressure later.
- It establishes your group as fair. It shows that you are willing to treat the person you’re lobbying respectfully and give her a chance to hear your case and respond.

Sometimes it’s more effective to use high-profile, public events from the start to launch an issue, draw attention to your group, gain political respect or get a meeting with the person you want to lobby. This approach can be effective because you have more influence when you come to a meeting as the representative of a highly visible and vocal group.

**Keep your partners up-to-date.**

Partners can only help if they know what’s going on.

**Keep records of what you do.**

Keep copies of letters you write and receive. Keep notes from meetings you attend. Some issues play out over a long period of time, with periods of great activity followed by periods when nothing much happens. New people join in and old supporters move on to other issues. A record of what you’ve done can help keep your effort on track.

Lobbying is never wasted effort. You may not win every battle. You may not always get exactly what you’d hoped for, but you always benefit, as an individual and as a group. You learn new skills, gain confidence in your abilities, learn that you’re stronger than you might have thought, find out more about how things work and meet people you might never have known otherwise.

One way or another, you always win.
Section 3: How to Take Action

"How to..." Sheets

| How to...Build useful working relationships |
| How to...Plan and make effective presentations |
| How to...Let people know about your issue |
| How to...Get the most from meetings with politicians |
| How to...Find more information |
How to...

Build good working relationships

Successful lobbying depends on building honest, mutually respectful relationships with the politicians and public servants you are trying to persuade. In the course of your effort to influence policy, you'll also need to develop cooperative, constructive relationships with many people—for example, people in your community; media; policy makers; influential people; experts; researchers; and women and men in other organizations who have knowledge about your issue.

To build good working relationships:

Be honest.
No goal is worth your integrity. Be yourself and tell the truth. Good relationships are built on trust. If the people you are lobbying or working with think that they cannot trust you, you will not be effective. Honesty and sincerity are very powerful.

Be calm and polite.
Keep your temper in check and be polite to everyone you meet. Thank anyone who helps you. This includes secretaries, receptionists, administrators and constituency workers. These people can be a big help if they are on your side so don’t burn any bridges. Lobbying can go on for a long time and you may see the same people again and again.

Be fair.
There is great value in putting yourself in the shoes of the people you’re lobbying. Don’t just ask them to see your side—try to see theirs as well. People will be more willing to listen to you if they see that you are willing to listen to them. You don’t have to agree with their position, but you will be able to make your points more effectively if you understand their position. It is very effective if you can state your case as “we’re trying to solve this together.”

Be well informed.
Good policy is based on good information. Know your issue and come to meetings prepared to explain it clearly and answer questions. Lobbying is most effective when you not only bring a problem to the table, but you can also suggest a solution. Your ideas, insights and suggestions can contribute to good policy.

Be helpful.
Look at lobbying as an exchange—you want something from the people you are lobbying. What can you offer in return? For example, public officials all need to know about the outcomes of policies. You can offer information about the effects of policy on your community from your group’s unique point of view. People will be more willing to help you if you are willing to help them.
Take the long view.
Lobbying can be a fairly long, drawn-out process. Before you start you need to be reasonably sure that you have the energy and enthusiasm to keep at it for what could be a long haul. Don’t give up and expect immediate changes. Don’t take conflicts and defeats personally. Keep talking. Keep coming back. Be willing to compromise as long as you’re still moving toward your goal. A small step in the right direction is better than no step at all.
How to... Plan and make effective presentations

Many of us are shy about speaking or making presentations in front of other people. It becomes a lot less scary when you plan, prepare and practice.

Plan

Find out as much as you can ahead of time.

Who will you be talking to? Effective presentations are tailored to meet the needs of the listeners. You would make different kinds of presentations to a community group, high school students or a county council.

How big is the group? An informal chat with a small group of people is different from a formal presentation to a large group.

Why are you giving the talk? Are you asking the listeners to do something for you—for example, give you funding or support your issue? Or are you just introducing your group? If someone invites you to make a presentation, be sure to ask why they’ve invited you and what they’re expecting.

How much time will you have? You need to know this so that you can be sure to make the points that are most important. Speakers who go over their time wear out their welcome quickly. Be sure to ask if your time period includes a question period. For example, if you have 15 minutes, including questions, then you should plan to speak for about 10 to 12 minutes to allow time for questions from the audience.

What facilities are available? For example, there’s no point in preparing overheads if there’s no overhead projector or screen available.

Prepare

Once you know the kind of presentation that’s expected and the kind of audience who’ll be listening, you can prepare your talk. Keep in mind that effective presentations are short, clear and to the point. Every presentation has a beginning, middle and an end, and is often followed by questions.

Beginning: Thank your audience for the opportunity to speak to them and summarize what you’re going to talk about. Some speakers like to start their presentations with a joke or a story that relates to their topic.
**Middle:** This is where you make your points and inform or persuade your listeners. Usually you won’t have time to cover more than two or three points, so choose them carefully. Put your most important point first -- that way, if you run out of time, you’ll have at least covered the most important thing. If you plan to use overheads or other visual aids, don’t get carried away and use too many. Use only those that support or illustrate your points. A good rule is to use no more than one overhead for every two minutes of your talk.

**End:** This is where you very briefly summarize what you’ve said. If the point of your presentation is to ask the listeners to do something, this is where you tell them what you want them to do or ask for their support.

**Questions:** Most presentations end with questions from the audience. Part of your preparation is to try to imagine the kinds of questions the specific group you’re talking to will ask. This allows you to have answers ready. If someone asks you a question that you can’t answer, say so. Tell the person asking that you appreciate the question and will be glad to get back to her with an answer. Ask her to see you after the presentation so you can get her contact information and get back to her as soon as you can.

**Practice**

Once you’ve prepared your talk, you need to practice your presentation by saying it out loud. Most people get bored listening to someone read a presentation. You need to know your talk so well that you don’t have to read it. To practice:

**Make notes** to use as a reminder of what you want to say.

**Practice your presentation out loud, standing up.** If you’ll be using overheads, practice using them at the same time.

**Time yourself.** You may need to adjust your talk to fit into your allotted time.

**Practice in front of an audience.** Rehearse in front to family, friends or anyone who’ll listen. Ask them for honest feedback and suggestions. Do you sound clear, informative and convincing?

**Practice answering questions.** Ask whoever is watching you practice to ask questions and give you feedback on your answers.
How to… Let people know about your issue

Reaching People in Your Community
The best way to reach people in your community is to talk to them directly—either informally (whenever you happen to run into someone) or formally (through meetings and organized discussions). Your group can hold public meetings to discuss your issues or can ask to speak at meetings of other community groups.

Reaching a Bigger Audience
Once you’ve got your community interested and involved in the issue, you may want to share your information and ideas with a wider audience. This means working with the media—the press, television and radio. The most common ways that community groups interact with the media are through press releases and interviews.

Press Releases
You use a press release to let the media know about an event or issue. Your press release will attract more media interest if your topic is interesting to the media. In other words, if it’s “newsworthy.” Newsworthy stories are about something concrete—an event, a meeting, an award—that can be described and reported. Newsworthy stories can also follow up on another news story—your group’s response to a new government policy or a statement by a Minister. Or they can give a local or human-interest perspective to a bigger story. A good press release:

- **Is short and to the point**—preferably one side of one sheet of paper. It should be double-spaced and have short paragraphs.
- **Has the name and phone number of a contact person**—someone a reporter can call for more details. Your contact should be well-informed, comfortable answering questions and easy to reach.
- **Has all the important information at the beginning.** Within the first sentence or two, you should answer the questions who, what, where, when and why.
- **Is timely:** Reporters will only pay attention to your press release if it’s relevant to a story that’s current. Old news doesn’t get covered.
- **Is interesting.** A press release is more likely to be used if it includes an interesting and informative quote from an identified speaker.

Before you distribute a press release, contact media outlets to find out to whom the press release should be addressed, how it should be sent (E-mail? Fax?) and what the deadline is.
Interviews
You may be asked to give an interview in response to a press release or because a reporter has contacted you or your group looking for information.

The best way to get your message across in an interview is to:

- **Be brief and clear.** Most news stories are very short, so focus on the information that’s most important. Make your point clearly, quickly and in as few words as possible. If the reporter wants more details, he or she will ask for them.

- **Be accurate.** Stick to the facts. Don’t say anything you can’t back up. If you can’t answer a question, say so. Offer to get back to the reporter with an answer.

- **Stay calm and be careful.** Don’t get angry or upset or allow yourself to be pushed into saying something you’ll regret later. Don’t say anything that you don’t want to read in the paper or hear on the radio or see on TV. No matter how friendly the reporter seems, everything you say is fair game. Nothing is “off the record.”

It takes time to develop media skills and to be comfortable talking to reporters. Many groups pick several members to be their spokespersons. This gives them a chance to develop skills for talking to the media and helps ensure that your group’s message is always the same. Groups can help their spokesperson rehearse by spending a few minutes during each meeting asking tough questions so the spokesperson has a chance to practice answering.
How to... Get the most from meeting with politicians

At some point in any policy-related process, you’ll need to meet with political representatives—municipal (councilors, mayors), provincial (MLAs) or federal (MPs).

During a meeting, your goal is to make your point quickly, clearly and memorably. Most politicians meet with a lot of people and you want this person to remember you and support your issue.

Before your meeting, you will need to plan, organize and prepare.

Plan:
Decide what you want to talk about.
What’s your issue? What aspects of the issue do you want to address during this meeting?

Decide who you want to talk to.
Who is the best political representative to talk to about these particular aspects of your issue? Is this aspect of your issue best addressed at the local, provincial or federal level? Eventually, you may want to talk to political representatives from all levels, but in each case, you’ll be talking about the parts of your issue the specific representative can do something about.

Don’t know your Representative?

Municipal
The Union of NS Municipalities has contact information for all of Nova Scotia’s municipal units: http://www.unsm.ca
Click on “Membership Directory”. Then click on “Quick list of municipal units” for addresses and phone numbers.

Provincial
You’ll find contact information for all MLA’s at: http://www.gov.ns.ca/legislature/members/Index.html

Federal
Contact information for all MP’s—both in Ottawa and in their home constituencies—can be found at: http://www.parl.gc.ca
Click on “Senators and Members” and then on “House of Commons – Current.” This page has a handy “Find your MP using your Postal Code” feature.

Find out how to contact the person you want to meet.
The information you need is in the box on this sheet.
Organize:
**Make an appointment** with the political representative you want to meet. You can telephone, write or e-mail. Be sure everyone is clear about the date, time and place.

**Decide who will go to the meeting.** Most people feel better if they have company, but you don’t want to bring a crowd. Two or three people is good—with this number, everyone will have a chance to speak. If you have partner groups who are working with you on the issue, bringing representatives from several different groups is a good idea.

Prepare:
There are two goals in an effective meeting: **make your point** and **make a friend**—or at least an ally. You want to leave the meeting feeling that the person you’ve met understands your issue and is on your side. This takes preparation!

**Decide what you want to say.** Meetings with politicians last about 30 minutes, at the most. You won’t have a lot of time, so it’s important to be very clear about what you want to say and to get right to the point. A good rule is to pick three points you want to make and know those points well.

Make a short list or outline of these points and send it to the politician you’ll be meeting with a few days before the meeting. This gives him or her a chance to prepare, too.

**Prepare your presentation.** For each point you want to make:

*State the issue:* Be very clear about how you see the problem.

*Give examples that make it real:* Politicians get elected because people vote for them, so it’s very important for them to know how issues affect their constituents. Use examples and stories to show how your issue is affecting the lives of people in your community.

*Offer solutions:* Describe the changes you think will help make life better for people in your community. Explain why you think your approach will work. Tell the politician what you want him (or her) to do.

*Be prepared to answer questions.*

**Decide who will do the talking.** Everyone who comes to the meeting should have something to say. One way to do this is to give each person one of your points to make—that is, for each point, one person states the issue, gives examples, offers solutions and answers any questions. Another way is to have one person introduce each point, another give the examples and a third offer the solutions. Questions could be answered by whoever feels comfortable doing it. You should also work out the order of the speakers—who will speak first, second, and so on.

After the Meeting
Within a few days after the meeting, write a brief letter to the person you met with. Thank him or her for the meeting and briefly summarize what was said. End the letter by saying that you look forward to continuing to work together on this issue. This is an important step because it provides both parties with a written record of what happened.

A letter like this is also a handy way to let the rest of your group know what happened. You can print it in your newsletter, pass copies around to other members of your group, or if you have a meeting place or community center, post copies there for everyone to read.
**How to... Find more information**

We all need information for planning, lobbying and understanding issues. The problem is that there is so much information around that it can be very difficult and frustrating to find what you need.

One excellent place to go for help and advice is **your local library**. There are 73 public libraries in Nova Scotia and all of them have Internet access that you can use. Libraries also have access to many interesting and useful sources of information that it might be difficult for the general public to find. Reference librarians usually know where to look to find the information you need.

More and more information is available on the worldwide web every day. Anyone can access this information at public access computer sites, called C@P Sites. On the C@P website you’ll find maps and lists of all the sites in Nova Scotia, as well as links to many useful government and education sites. The C@P address is:

http://nsaccess.ns.ca/CAP/nscap/

This information sheet lists a few key resources that are good places to start looking for information.

**Influencing Policy**

**Community Tool Box**

http://ctb.ku.edu/

The Tool Box contains easy-to-read "how-to" information on the tasks necessary for community health and development. The toolbox has sections on advocacy work and can be found by clicking on:

- Section 4. Systems Advocacy and Community Organizing
  http://ctb.lsi.ukans.edu/tools/EN/section_1056.htm
- Part I. Organizing for Effective Advocacy
  http://ctb.lsi.ukans.edu/tools/EN/part_1009.htm
- Chapter 30. Principles of Advocacy
- Chapter 31. Conducting Advocacy Research
- Chapter 32. Providing Encouragement and Education
- Chapter 33. Conducting a Direct Action Campaign
- Chapter 34. Media Advocacy
- Chapter 35. Responding to Counterattacks
Coastal Communities Network
http://www.coastalcommunities.ns.ca/

The Coastal Communities Network is a volunteer association of organizations whose mission is to provide a forum to encourage dialogue, share information, and create strategies and actions that promote the survival and development of Nova Scotia's coastal and rural communities. The site has lots of interesting material, particularly the “Fish Facts” section, which contains helpful statistics about fishing and fishing communities and much more.

Environment Canada Community Programs
http://www.atl.ec.gc.ca/community

This site contains information about Environment Canada's Community Programs aimed at helping groups create healthy, sustainable communities including the Community Animation Program and the Atlantic Coastal Action Program. The site offers links, success stories and resource materials including:

- Developing a project
- Fundraising
- Health and Environment
- Strategic Planning
- Research
- Tools for Building Sustainable Communities

Health Promotion Clearinghouse
http://www.hpclearinghouse.ca/

The Health Promotion Clearinghouse is a provincial program connecting people and organizations to information and support that can assist them in their health promotion and population health work. The Clearinghouse has a Resource Coordinator who can connect you to other organizations, resource materials, speakers, upcoming events and resource people in your community. The topics the Clearinghouse covers (among many others) include: advocacy and policy development; population health; and proposal and grant writing.

The information on advocacy is very useful. It contains links to many good resources as well as links to websites where you’ll find contact information for municipal, provincial and federal politicians.

Making Public Policy Healthy…A Vision for Our Community’s Health
http://www.infonet.st-johns.nf.ca/providers/nhpp/docs/policy.html

You’ll find straightforward, easy-to-understand information on how to influence policy development. The site is aimed at Newfoundland, but the information is useful anywhere.
Population and Public Health Branch- Atlantic Region
http://www.phac-aspc.gc.ca/canada/regions/atlantic/
This site contains information about the Public Health Agency of Canada- Atlantic Region, including its work, projects and publications. It also contains links to sites with more information about health in general and population health in particular.

Rural Communities Impacting Policy: A Community-University Research Alliance
http://www.ruralnovascotia.ca/
RCIP’s goal is to increase the ability of rural communities and organizations in Nova Scotia to access and use social science research in order to influence and develop policy that contributes to the health and sustainability of rural communities.

The project is developing three tools that will be useful to groups or individuals interested in the impact of policy on rural communities.

The Rural Tackle Box will provide practical tools and information to help rural Nova Scotians influence and develop policy that contributes to the health and sustainability of their communities. The tools and information will be added and made available as they are developed with the expectation that the Rural Tackle Box will be completed by late 2002 or early 2003.

Rural Report: The document "Rural Report—Painting the Landscape of Rural Nova Scotia" will provide a comprehensive description of rural Nova Scotia, including many useful statistics. The Rural Report will consist of six main sections and will be made available both electronically and in hard copy. Expected completion date is summer, 2002.

The Information Access Portal is a web-based tool that will provide an electronic portal to sources of information that will increase the ability of rural Nova Scotians to better understand and influence policy that contributes to their communities' health and sustainability. The portal is expected to be opened in a limited capacity by spring, 2002 and continue to be expanded until its completion in early 2003.

Women's Issues

Atlantic Centre of Excellence for Women's Health
http://www.acewh.dal.ca
Contains research reports on many aspects of women's health as well as background information on social and economic inclusion in the Atlantic provinces. You can download the complete kit "Basic Information on Social and Economic Inclusion" from the site.

Canadian Research Institute for the Advancement of Women (CRIAW)
http://www.criaw-icref.ca
CRIAW is a national, not-for-profit organization that advances women's equality through research that bridges the gap between the community and researchers, and between research and action. CRIAW's website contains many useful and interesting publications and fact sheets.
Development Alternatives with Women for a New Era (DAWN)
thttp://www.dawn.org.fj
DAWN engages in feminist research and analysis of the global environment and works for economic justice, gender justice and democracy. DAWN works globally and regionally in partnership with other global NGO's and networks. Interesting information with a global perspective.

Nova Scotia Advisory Council on the Status of Women
http://www.gov.ns.ca/staw
   Good information, fact sheets and links to topics of interest to women.

Women’s Community Economic Development Network
http://www.womenscednetwork.org
   This website has lots of interesting information as well as many useful links to other groups and sources of information. Of particular interest is their publication:

   **Tea You Could Trot a Mouse On...**
   The Elements of Community-Based Economic Development
   http://www.womenscednetwork.org/publications/publicationsinfo.htm

   A clearly written resource that uses good humour and common sense to introduce a wide variety of skills. This two-volume series is designed to help community groups, organizations and individuals enhance their capacity for economic and social development. The chapter headings are:
   1. Community-based Economic Development (CED)
   2. Leadership skills
   3. Facilitation skills
   4. Formal meeting skills
   5. Building an organization
   6. Networking skills
   7. Partnerships
   8. Writing funding proposals
   9. Public relations
   10. Bookkeeping
   11. Reading financial statements
   12. Alternative forms of doing business
   13. Co-operatives
   14. Starting a small business
   15. Facilitator’s guide

This resource is expensive to buy: $250 for two big spiral-bound books—but every Women’s Centre and Adult Education Resource Centre in Nova Scotia has been given a copy and you can see it there.
Section 4: Group Facilitator Notes & References

Notes and ideas for group facilitators

References
Section 4: Group Facilitator Notes and References

Notes and Ideas for Group Facilitators
We’ve designed this Kit to be as flexible as possible, and hope that you will find many different ways to use all or part of it to meet your individual needs as well as those of any group you may be facilitating or working with. An essential first step is to spend some time becoming familiar with the Kit. There’s a lot of information buried in it and it’s easy to overlook something you may need later.

Depending on the financial and human resources of your group, there are several different ways to approach addressing an issue using the Kit.

• This Kit can be used by a well-organized group or organization—like a women’s centre—to inform people about, and focus action on, an issue in their community. Such an organization may have the resources to sponsor a one-day workshop (see Example 1 in this section) or may be able to offer in-house facilitation and support for a series of meetings that use the Kit to address a community issue.

• If your group is less formally organized, you could look for a community ally to sponsor an initial workshop or you could raise funds to pay for a facilitator to conduct a workshop in your community. Some groups have found it very helpful to work with a guide—someone they can turn to for advice and support as they begin learning about and acting on policy issues. A guide can be anyone you know and trust who has a bit more experience with policy issues than you do—for example, someone involved with a women’s centre, or with an environmental, health or political organization. The guide’s role is to help group members to decide what to do and to give them advice on how to go about doing it, not to lead the group or facilitate meetings. Depending on your relationship with the guide, she might come to meetings or just be available by phone when needed.

Good Policy, Good Health can help a group to:
• Make connections between problems in their communities, the health impacts of those problems, and the public policies that contribute to them
• Develop an understanding of the concepts of health and policy and how they interact
• Move from this understanding to deciding to act, identifying a policy they’d like to address, and setting a course of action
• Initiate and carry out their action
• Reflect on and evaluate both the action and the learning and skill development that resulted from the process.

Working with a group to influence policy development or to change existing policy, can be a long and intensive process. It’s not often easy or straightforward and groups sometimes feel that they have to tackle everything at once. Remember that change can come slowly. Start with issues where you feel you can make a difference.
It’s also important to recognize that you’ll probably face some of the issues other groups of women have faced. These include:

- The stresses of not having enough time, energy or money to address all the issues you see as important
- Negative or hostile community attitudes toward women’s groups
- Barriers presented by small town politics
- Questions about whether women have any business being involved in issues traditionally dealt with by men—for example, the fishery

Even when you find yourself facing these kinds of challenges, the huge advantage of being part of a group is that you can rely on one another for mutual support and for strategies to address whatever difficulties you face. The knowledge that you’re not alone and that you’re all in this together can be a powerful source of strength.

This section on using Good Policy, Good Health with a group is organized into three parts:

Part 1: Suggestions for Using Each Section of Good Policy, Good Health

Part 2: Sample Workshops using Good Policy, Good Health
- Example 1: A One-Day Workshop
- Example 2: A Series of Six Facilitated Meetings

Part 3: Tips for Facilitators
- Workshop Basics
- How to Get People Talking in a Workshop or Group
- Celebrate Successes
Part 1:
Suggestions for Using Each Section of Good Policy, Good Health

Using Section 1:
Linking Problems, Policy and Health

This Section is built around the issues women in coastal communities identified as the impacts policies were having on their health and the health of their communities. Each of the information sheets in Section 1 comes with a set of discussion points aimed at helping the group to begin relating the topic to their observations and experiences in their own community.

Depending on your group’s interest and the time you have available, you can address each of the topics in sequence over a series of several meetings or select the one or two that are most relevant to your group for an in depth discussion at a single meeting.

It can be helpful to introduce these issues by referring to the report, Women’s Health and Well-Being in Six Nova Scotia Coastal Communities, which you’ll find in Section 5. The women participating in our pilot test accepted the information as credible and relevant when they understood that it came from other women like themselves. Even if you are not in a fishing community, many of the issues raised in the report may still be relevant. Or you may have access to research reports or information from women in your own community. For example, a group in Bridgewater, Nova Scotia used the Kit to examine food security as a health issue and to link it to policy issues. They used their own experience with the issues and various pieces of research on poverty as resources.

Section 5 also includes Basic Information on Social and Economic Inclusion, which you might find helpful in explaining why some groups of people find it more difficult to participate in policy development than do others.

You will find information that will deepen and expand your own, and your group’s understanding of the policies that are referred to in Section 1 in the FishNet FactSheets that are included in Section 5. The FactSheets that are most relevant to each topic are listed below.
<table>
<thead>
<tr>
<th>Issue</th>
<th>Related FishNet FactSheets</th>
</tr>
</thead>
<tbody>
<tr>
<td>Loss of Control</td>
<td>1A: The State of NS Coastal Communities and Key Issues Affecting Women</td>
</tr>
<tr>
<td></td>
<td>1B: Women's Work in Families and Coastal Communities</td>
</tr>
<tr>
<td></td>
<td>1C: Women in the Fishery</td>
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<td></td>
<td>1E: Women and Decision-Making</td>
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<tr>
<td></td>
<td>2A &amp; 2A.2: Employment Insurance</td>
</tr>
<tr>
<td></td>
<td>2F: Access to Information, Fair Treatment and Advocacy</td>
</tr>
<tr>
<td></td>
<td>2H &amp; 2H.2: Making the Links to Community Economic Development</td>
</tr>
<tr>
<td>Lack of Respect</td>
<td>1B: Women's Work in Families and Coastal Communities</td>
</tr>
<tr>
<td></td>
<td>1C: Women in the Fishery</td>
</tr>
<tr>
<td></td>
<td>1D: Women in the Labour Market</td>
</tr>
<tr>
<td></td>
<td>1E: Women and Decision-Making</td>
</tr>
<tr>
<td></td>
<td>2B: Recognition of Women’s Work in Family Businesses</td>
</tr>
<tr>
<td></td>
<td>2F: Access to Information, Fair Treatment and Advocacy</td>
</tr>
<tr>
<td>Financial Instability</td>
<td>1D: Women in the Labour Market</td>
</tr>
<tr>
<td></td>
<td>2A &amp; 2A.2: Employment Insurance</td>
</tr>
<tr>
<td></td>
<td>2B: Recognition of Women’s Work in Family Businesses</td>
</tr>
<tr>
<td></td>
<td>2C: Employment Opportunities in Coastal Communities</td>
</tr>
<tr>
<td></td>
<td>2D &amp; 2D.2: Training and Job Development programs</td>
</tr>
<tr>
<td></td>
<td>2E 7 2E.2: Fisheries Policies</td>
</tr>
<tr>
<td>Community Breakdown</td>
<td>2H: Making the Links to Community Economic Development</td>
</tr>
<tr>
<td>Isolation</td>
<td>2G: Community Infrastructure and Public Services</td>
</tr>
<tr>
<td>Stress</td>
<td>2G: Community Infrastructure and Public Services</td>
</tr>
</tbody>
</table>
Using Section 2:
Moving from Thought to Action

The material in Section 2 is designed to help group participants begin to move from identifying and talking about policy links to beginning to address them.

The first three information sheets provide a grounding in the basic concepts that the group will be addressing through whatever action they decide on: health, policy and their interactions.

Each group will determine for themselves how much time they need to discuss and understand these concepts.

Section 2 ends with a community action sheet that starts the process of defining an action to take.

Listed below are some statistics and quotes that you may find helpful to stimulate discussion on policy and health. You might also find them useful at other points in your sessions. These are specific to Nova Scotia and to women in coastal communities, but the ideas are applicable to many other places and circumstances. If you are not in Atlantic Canada, you may be able to find similar statistics for other provinces and regions.

- Income and Social Status is the single most important determinant of health. People at every step up the income ladder are healthier than those on the step below. People’s health is also affected when there is a big gap between the income of the richest people and the poorest.

- In Atlantic Canada nearly one in five women live below the poverty line.

- Without the wife’s income, more than twice as many families in Nova Scotia would fall below the poverty line. In 1997, 11% of husband-wife families were living in poverty. Without the wife’s income, that would rise to 24%.

- Nova Scotia has the highest child poverty rate in the country—and it’s going up. In 1989, 16.5% of Nova Scotia’s children under 18 were poor. In 1997, 22.4% were poor.

- Studies have shown that when a man loses his job, the stress can cause the health of his wife and children to get worse.

- Women’s stress levels are rising. In 1985, Nova Scotian women’s stress levels were 12% lower than men’s. By 1991, they were 29% higher than men’s. In 1996, Nova Scotia had the second highest level of stress in Canada.

"My husband was employed by National Sea Products for 25 years. In 1983 his net income was $11,000 a year. In 1998, his income from the early retirement program for fish plant workers combined with his income from Canada Pension is $10,000 a year... I am employed at Sears part-time. After 16 years, I was laid off and rehired three months later in the Sears Call Centre. In 1991, my income was $11,000 and in 1998, it was $7,000. Talk about going down a ladder."

FishNet Report
• Mental health and stress affect physical health. People with high levels of mental distress are more likely to become physically ill.

• Strong social support networks may help to ease the stress caused by low income. Newfoundlanders have the lowest levels of stress in Canada, even though they have higher levels of unemployment and lower incomes. One reason given for this is that Newfoundlanders are helped by their strong sense of family and community.

“There's stress if you can't even go out one night a month. I get more energy if I know I have something to look forward to. Plus, you don't feel pain when you're out. If you don't do anything fun, you don't get rid of your stress, and stress leads to all kinds of other problems—high blood pressure, cancer, mental problems. I can't believe that I got out more when I had three small children than I do now. Now, you can't afford to do anything and there's nothing to do around here anyway.”

FishNet Report
**Using Section 3:**

**How to Take Action**

You may or may not find it helpful to refer to these sheets directly during the course of a group meeting. In some cases, they will be best used as reference material when the group becomes engaged in some form of action.

You can consider making a copy of the entire set for each member of the group or simply letting them know they are available as needed.
Part 2:
Sample Workshops Using Good Policy, Good Health

Example 1:
One-day Workshop
(With thanks to the Workshop Organizing Committee and Stephanie Hunter who developed this workshop.)

Parts of Good Policy, Good Health can be used to support a one-day workshop that offers a brief introduction to policy and policy change.

This approach can be useful for groups of women who are interested in health and/or policy issues but don’t feel they know enough to do anything about it, as well as for women who may already have an issue they’d like to address but don’t know what to do first. The workshop outlined below was developed for the second case—the women participating were interested in addressing issues of food security and wanted to learn more about how policy affected food security and their health.

The workshop was hosted and organized by the Second Story Women’s Centre, and the organizers assisted by facilitating small groups during the workshop.

The handouts from Good Policy, Good Health were:
- What is health? - Information sheet, discussion points sheet, and the overheads/flipchart sheet.
- What is policy? - Information sheet, overhead/flipchart sheet and discussion points sheet.
- How policy affects health - Information sheet, discussion points sheet and overhead/flipchart sheet.
- Section 2: Moving from Thought to Action - Introduction
- Section 3: How to Take Action - Information sheet
## Moving from Policy to Action:
### A Workshop for Women on Policy Change

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
<th>Who</th>
<th>Details</th>
<th>Resources</th>
</tr>
</thead>
<tbody>
<tr>
<td>9:00 –</td>
<td>Welcome and Introductions</td>
<td>- Organizers - Facilitator</td>
<td>- Talk about the reasons for the day and basic objectives&lt;br&gt;- Housekeeping items&lt;br&gt;- Introduce Facilitator</td>
<td>- Name tags&lt;br&gt;- Copies of Agenda and objective&lt;br&gt;- Refer to Kits and handouts</td>
</tr>
<tr>
<td>9:30 –</td>
<td>Icebreaker</td>
<td>- Facilitator</td>
<td>- Break participants into groups of 3&lt;br&gt;- Participants introduce themselves in group with name, reason for coming, what they hope to get from the day, favourite fun activities (10 minutes)&lt;br&gt;- Reform large group&lt;br&gt;- Participants from small groups introduce one another (20 minutes)</td>
<td>- Paper and pens</td>
</tr>
<tr>
<td>10:00 –</td>
<td>Small Group Discussions</td>
<td>- Facilitator&lt;br&gt;- Organizers facilitate small groups</td>
<td>- Topic: What is health? What affects our health?&lt;br&gt;- WHO Definition of health&lt;br&gt;- Brief discussion of other things that impact an individual’s health—i.e., health of their family, friends, community.&lt;br&gt;- Divide into 4 small groups.&lt;br&gt;- Ask each participant to share a time when they felt really good—healthy and strong. Ask them to talk about what was happening in their life at the time.&lt;br&gt;- Record the factors that helped them to feel healthy.&lt;br&gt;- Next ask group to share a time when they weren’t feeling healthy and strong.&lt;br&gt;- Make a list of the things that were happening in participants lives at this time.&lt;br&gt;- Return to large group and</td>
<td>- Flip charts and markers&lt;br&gt;- Tape for posting sheets&lt;br&gt;- The organizers each go with a group to guide the discussion and keep group on track.&lt;br&gt;- Ask if someone wants to record. If not, facilitators record themselves&lt;br&gt;- Ask if someone wants to report back to the large group. If not, do it themselves.</td>
</tr>
</tbody>
</table>
# Moving from Policy to Action: A Workshop for Women on Policy Change

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<tr>
<th>Time</th>
<th>Activity</th>
<th>Who</th>
<th>Details</th>
<th>Resources</th>
</tr>
</thead>
<tbody>
<tr>
<td>10:30 – 10:45</td>
<td>Nutrition Break</td>
<td>All</td>
<td>- Remind participants that smoking is only allowed outside.</td>
<td>- Beverages and snacks provided</td>
</tr>
<tr>
<td></td>
<td>- Reporting back from small groups</td>
<td>- Reporter from each group</td>
<td>- Review and compare flip chart sheets from each group</td>
<td>- Posted flip chart sheets from the small group discussions</td>
</tr>
<tr>
<td></td>
<td>- Draw out any emerging themes</td>
<td>- Facilitator and participants</td>
<td>- Note and discuss any emerging themes</td>
<td>- Handouts from Good Policy, Good Health</td>
</tr>
<tr>
<td></td>
<td>- Tie-in with handouts and</td>
<td>- Facilitator with</td>
<td>- Review handouts from <em>Good Policy, Good Health</em>—e.g., “What is policy?”, and “How does policy affect health?” Tie in themes and issues that have emerged from the group with the handouts and the determinants of Health (Which are posted and visible.)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Determinants of Health</td>
<td>participants</td>
<td>- Connect this discussion of health and what affects it to poverty, stress, addictions and back to health. Show the links between policy and health—e.g., the impact specific policies can have on health. Clarify any confusion and answer questions. Be sure participants are ready to move on the afternoon activity of identifying a problem policy.</td>
<td>- Flip chart for recording large group discussion</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Relate issues of health to poverty and then back to health</td>
<td>- Review emerging themes from the morning</td>
<td>- Markers and tape</td>
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<td></td>
<td></td>
<td></td>
<td>- Review relevant food security handouts</td>
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<td></td>
<td></td>
<td></td>
<td>- Divide into 4 groups to explore what policies are affecting them directly and</td>
<td></td>
</tr>
<tr>
<td>12:00 – 12:45</td>
<td>Lunch</td>
<td>All</td>
<td></td>
<td>- Lunch provided</td>
</tr>
<tr>
<td>12:45 – 1:45</td>
<td>Identifying Problem Policies</td>
<td>- Facilitator</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>- Organizers facilitate small groups</td>
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**Notes and ideas**

**Group Facilitator Notes and References**

Nova Scotia Women’s FishNet 2004
## Moving from Policy to Action:
**A Workshop for Women on Policy Change**

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
<th>Who</th>
<th>Details</th>
<th>Resources</th>
</tr>
</thead>
</table>
| 1:45 – 2:15 | Report back on problem policies that groups have identified | Facilitator and participants | - Review problem policies  
- Prioritize with whole group  
- Select a policy or policies that they would like to focus on in the immediate future  
- Record selected policy or policies on a flip chart | - Posted sheets from groups  
- Flip chart paper for prioritizing |
| 2:15 – 3:30 | Influencing and lobbying for change | Facilitator and participants | - Identify strategies for action  
- Decide on next steps  
- Do this activity as a whole group if one policy has been selected. If several have been identified, assign a small group to work on each policy.  
- Record strategies for action and next steps on a flip chart | - Flip chart, markers, tape |
| 3:30 – 4:00 | Wrap-up and Evaluation | Facilitator | - Fill out and return evaluation forms  
- Thank participants for coming and for their input | - Evaluation Forms |
Example 2: A Series of Facilitated Meetings

*Good Policy, Good Health* can be very effective when used by a group with the support of an experienced facilitator. The facilitator’s role is to introduce the topic of policy and health, expand on it as needed, keep the discussion on track and help the group to make the transition from thinking about their problems to taking action to address some of them.

One way to approach this is through a series of meetings, held over a period of weeks or months. The outline below is based on a series of six meetings conducted as part of our pilot test of the Kit.

It may not be possible for all groups to develop, initiate and carry out a strategy to influence policy within a six-week period. However, the facilitator’s support during the initial period can certainly help the group get off to a solid start.

The outline below is only one suggestion. Some groups may be more interested in spending time on the links between problems, policies and health. These groups may prefer to spend one meeting on each of the issues in Section 1 before moving on to considering taking action in their community.

Other groups may already see the connection between policy and health clearly and want to move more quickly to action.

Consulting with your group in advance or during the first meeting can help you to decide on an effective approach and time frame.

If you plan to get together over a period of several weeks, you may find it helpful to photocopy the information sheets in advance so that participants can read them before the meeting at which they will be discussed. In our pilot test, the facilitator found that although the participants read and understood the material, they still found it helpful to have her recap the information when they met.

### Meeting 1

Introduce and discuss community problems, their impact on health and make links to policy (suggested questions: what’s happening in the community? What impact is this having on community – individuals, families, and women in particular. Why is it happening?)

Storytelling can be a good place to start. In our pilot test, the stories of the individual women led to the shared understanding of the collective community problems.

*Resources:*

Any two of the issues from Section 1 and their discussion points
Meetings 2 and 3
Develop an understanding of the concepts of health and policy

Resources:
Section 2: Information Sheets and Discussion points:
What is health?
What is policy?
How does policy affect health?

Meeting 4
Moving from Discussion to Action

One approach is to brainstorm a list of all the potential policy issues -- local, provincial, federal and organizational -- that are affecting the community. You can follow this by identifying what would need to change to improve the situation. Then, considering the group’s resources, strengths, time limitations and challenges, choose an issue to address.

Resources:
Section 2: Action Sheet: What can we do?
Section 3: Whatever materials will assist your group in planning and developing their strategy

Meeting 5
Taking Action: Beginning to carry out the strategy

This is where the group begins to address the actual tasks involved in carrying out their strategy. It includes making plans, assigning jobs, and identifying potential partnerships.

Resources:
Section 3: Whatever materials will assist your group in planning and developing their strategy

Meeting 6
Continuing work on the strategy

Resources:
Section 3: Whatever materials will assist your group in planning and developing their strategy

Follow-up Meeting
Reflecting and Evaluating

When the activity has been completed – or in the case of long-term lobbying, is well underway – bring the group together again for an informal look at what they’ve accomplished and learned.
Some sample questions to start discussion:
- Did your group achieve all or part of their goal?
- How has being part of this process:
  - Increased your knowledge about how policy decisions are made?
  - Increased your knowledge of how to find information about better policies that you can suggest as alternatives to existing policies?
  - Increased your knowledge of how to present your case to policy makers?
  - Increased your ability to identify people who can help you access the policy process?
  - Increased your ability to take action on a policy issue?
  - Increased the likelihood that your organization will be more active in trying to bring about policy change on other issues?
Part 3:
Tips for Facilitators

Basic Information about Planning and Facilitating Workshops
(Adapted from: Preventing Falls Together: A Population Health Tool Kit, Community Links, Dartmouth, NS, 2003)

Think about all the workshops you’ve attended. Which ones stick in your mind? Do you smile when you remember them? Did any of them cause you to change the way you thought about or did something?

Chances are, the workshops you remember most fondly were:

- **Relevant**: They offered information you wanted in a way that appealed to you and that you could use.
- **Active**: They gave you more to do than just sit and listen.
- **Encouraging**: They presented ideas in a way that made you want to try them.
- **Fun**: That’s why you remember them!

No matter what content you present, one of your goals should always be to offer a memorable workshop – one that’s relevant, active, encouraging and fun.

Putting on a memorable workshop takes planning and facilitation.

- **Planning** has two parts. It involves both deciding on what content to include in your workshop and considering all the details that will ensure that the participants will be comfortable and able to enjoy the workshop.
- **Facilitation** is what you do to make sure that everyone who comes to your workshop feels welcome and glad they came.

Planning Your Workshop

Planning means thinking about who, what, when, where and why.

**WHO do you want to come?**
Will your workshop be open to everyone in your community? To members of a particular group – for example, people who use a women’s centre? How many participants would you like to have? Twelve to 15 is a good size for a workshop.

**WHAT will you do to let them know about the workshop?**
What you do to advertise your workshop will depend on who you want to participate. For example, if you are aiming at a general audience, you could use public service announcements on radio, posters in places like grocery stores, community centers and pharmacies, and ads in local newspapers.

If you are offering a workshop to a specific group, you can send personal invitations, advertise through that group’s newsletter, post notices at their meeting place and/or have the workshop announced at their meetings.
WHEN will it take place?
You need to consider:

- **Time of day:** Starting too early may make it difficult for everyone to arrive on time. Starting too late, may mean they must travel home after dark.
- **Time of year:** Winter weather may be a consideration if your participants must travel any distance to participate.
- **Other community events:** What else is happening in your community? You may want to plan your workshop to piggyback on other events – for example, to offer your workshop as part of a local health fair – or to offer it at a time when there are no competing events.

WHERE will it take place?
If you are piggybacking your workshop on another event or offering it to a specific group, the question of “where’ will be taken care of for you. If you are offering a workshop open to the general public and separate from another event, you’ll need to think carefully about where you hold it. Your workshop site should be:

- **Easy to get to:** Your site should be easy to find, be near public transportation (if this is available where you live) and have enough parking.
- **Accessible** for people using wheelchairs or mobility aids like canes or walkers.
- **Big enough** for the number of participants you expect.
- **Well-equipped** with the resources you need. Think about what you’ll need to offer the workshop and what your participants will need to be comfortable. For example, if you plan to ask participants to fill in forms or do writing or drawing, you’ll need tables. If you plan to use Powerpoint or overheads, you’ll need the equipment and a screen. The space should have good lighting, heating and ventilation and comfortable seating. If you plan to offer refreshments, you should be sure that you are permitted to bring food onto the site.

WHY should people come to this workshop?
This is where you plan what you will cover in your workshop. What can you offer that will be meaningful and valuable to the participants? What will give them a good reason to want to come and to be glad they came?

One good way to answer these questions is to consult with the sponsor of the workshop (if you are offering it at the request of another organization) or with some of the individuals you hope will come.

Whatever kind of workshop you decide to offer, make it relevant, active, encouraging and fun! The more you know about your participants, the easier it will be to do this, so it’s a good idea to talk directly with participants about what they’d like to know. If this isn’t possible, talk with representatives of the group or with people who work with them to get an idea about the interests and circumstances of the potential participants.

Remember to be realistic about the amount of information you can cover and the length of time any activities you plan will really take.
Facilitating Your Workshop

Facilitation is the way you go about delivering your workshop and involving the participants.

Whatever kind of workshop you decide to offer, you’ll need to have a plan that describes what you want to do and how you want to do it. In general, an effective policy workshop gives participants an opportunity to:

- **Learn** something about an aspect of policy and policy issues
- **Do** something personally or as a group to learn about or address a policy issue
- **Reflect** on how they think or feel about policy and its impact on their lives

This means that it isn’t very effective to just dump a load of information on participants who sit still and listen. In addition to offering information, you need to give participants an opportunity to use the information in some way – in an exercise or activity, for example. You also need to give them time to think about and discuss what they are learning.

A workshop has three parts: an opening, a content section and a closing.

**Opening:** The opening of a workshop sets the tone. It usually includes a welcome, some form of warm-up or activity to loosen people up or introduce them to one another and a brief introduction that sets the stage for the content of the workshop.

**Content:** This is where you pass along information about policy and its impact on health. Because most adults learn best when they are actively participating, it’s most effective to introduce the topic with an activity. For example, the sample one-day workshop in this section uses an activity in which participants break into small groups and answer the questions, “When was the last time you felt really healthy? What was going on in your life at that time?”

Once the activity has aroused interest, participants are in a receptive frame of mind to hear the material you want to convey to them. Learning and doing go hand in hand, so allow time for questions and discussion throughout your workshop.

**Closing:** Here you summarize what you’ve covered and give participants an opportunity to reflect on what they’ve learned and how they might use it in their daily lives. Some good “reflective” questions are:

- **What’s one thing you’ll take away from this workshop?**
- **What’s one thing you’ll start doing?**
- **What’s one thing you’ll stop doing?**
- **What’s one thing you’ll change?**
- **What’s one thing you’ll do this week because of what you’ve learned here today?**

**Timing**

The most common mistake facilitators make is trying to squeeze too much into their workshop. Questions, activities and discussion are not extras. They are an important part of the workshop and you need to allow a realistic amount of time for them. You also need to allow some “flex time” for socializing at the start and finish and to cover any activities that run longer than you anticipated.
How to Get People Talking in a Workshop or Group
(Adapted from: Preventing Falls Together: A Population Health Tool Kit, Community Links, Dartmouth, NS, 2003)

When you offer a workshop, the goal is to help everyone who comes to feel welcome and comfortable enough to participate in workshop discussions and activities. Experienced facilitators have a bag of tricks they use to encourage people to talk.

Some things you can SAY to encourage participation

• **Ask open-ended questions** that can’t be answered with “yes” or “no.”
  What do you think about that?
  How do you think we could change this?
  What are our choices?
  Why do you think that happens?

• **Ask for more information to encourage dialogue.**
  Tell us more about that.
  Describe what happened.
  Explain how you think that would work.
  Can you give us an example?

• **Ask for other points of view to encourage creativity and interaction.**
  Is there another way to look at this?
  Are we overlooking anything?
  Are there other points of view on this topic?
  Is there something we haven’t thought about?

• **Make positive comments.**
  Good point.
  That’s interesting.

• **Refer to contributions participants have already made.**
  That sounds like what Alice said earlier…

• **Refer questions or ideas to the whole group.**
  What do the rest of you think about this?
  Would anyone like to respond to that?
  I’d like to throw this issue to the group. What do you think?

• **Ask for input and ideas from less talkative participants.**
  Ann, would you like to respond to this?
  Susan, what do you think?
  Pat, didn’t something like this happen to you? What advice would you give?

• **Restate what has been said to be sure that everyone understands.**
  If I understand correctly, you’re saying that…
  Now, have I got this right? Your point is that…
Some things you can DO to encourage participation

- **Pay attention to whoever is talking.**
  
  *Show interest in what people are saying. Nod in agreement. Don’t interrupt.*
  
  *Smile, or at least look pleasant. Frowning while someone is speaking is very discouraging.*
  
  *Look at the speaker. Turn in his or her direction. The only good reason for turning away from a speaker is to record their comments on a flip chart.*

- **Keep quiet.**
  
  *Pause after you ask a question. Give people time to think about what they want to say.*
  
  *If no one says anything after about 10 seconds, ask again or rephrase the question.*
  
  *After someone answers a question or contributes to discussion, be quiet and give the other participants a chance to respond.*
  
  *Silence can be a powerful tool. A facilitator is there to listen as well as talk.*
Celebrate Successes

Addressing policy issues and making change in your community can be a long, hard slog. One way to keep up your spirits, energy and commitment is to celebrate small successes and personal milestones—for example, when a member of your group goes back to school or finishes a course, or when your group completes a step in its strategy, like meeting with a politician.

In this section you’ll find a sample “Whoopie Sheet” that you can copy and use to mark milestones and special occasions.
Whoopie!

Congratulations to

We’re so proud!
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Section 5:
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RECOGNIZING WOMEN: CONTRIBUTIONS & CONCERNS

The State of NS Coastal Communities and Key Issues Affecting Women

A Brief Historical Context

Coastal communities in Nova Scotia have historically relied to a great extent on the fishery for their sustainability and for their residents’ livelihoods. In the past, communities, small-scale fish harvesters, and fishing families were the stewards of the fishery and looked after the ecological and economic sustainability of coastal communities for generations. Entire coastal communities took a whole season to reap and share the benefits of what one or two companies now profit from in a day, given the present allocation of resources. In recent years, coastal communities have suffered socially, environmentally, and economically from the fisheries crisis and from trends in the fishing industry to move toward privatization, buy-outs of small scale fishing peoples, and increasingly destructive fishing practices.

“Women are facing harder times, with more to do, and many more difficulties to cope with, at the same time as having access to fewer services and economic opportunities.”

Issues Facing Women in Coastal Communities

In a recent study of women’s health and well-being in six coastal communities, NS Women’s FishNet heard many women’s stories of how they have been affected by the changes in their communities, by the atmosphere, which is often so full of despair and hopelessness, and by the divisions, which have developed between neighbours and families. This has caused an increase in low-self esteem, stress, and negativity.

Women feel that they are busier and more stressed, but also that they get together less. Many mention that the economic problems facing communities have shattered the social fabric and spirit of their communities. These economic problems have created divisions and have caused a decrease in both things to do in the community, and money to do things with. Women feel increasingly alienated and isolated. They are facing harder times, with more to do, and many more difficulties to cope with. At the same time, they have access to fewer services and economic opportunities. Many women blame fisheries and other government policies for the changes which have allowed destructive technologies and corporations to destroy the viability of their communities.

Women Need:

+ Viable and sustainable communities
+ More involvement and control over decisions affecting their lives and communities
+ Circumstances which promote a greater sense of hope for the future
+ Fewer factors that cause stress
+ Equitable and fair access to existing government programs and services
+ Viable opportunities to make a living
+ Communities which provide social, economic, educational, and recreational activities

FishNet 1a FACTSHEET

WOMEN’S ECONOMIC STABILITY & WELL-BEING IN NS COASTAL COMMUNITIES
In many communities, women are the backbone of the community. They are often community leaders; they have vital roles in managing families and keeping communities together. But despite women's enormous strengths, skills, knowledge, and workloads, many barriers exist that result in a lack of support and acknowledgement for the work that women do.

Many women suffer from confidence barriers such as low self-esteem. Sometimes this is a result of family abuse or lack of encouragement from a partner; other times it is a result of a lack of respect from public servants, fellow community members, and government decision-makers. Women's work at home is often not valued by families, and sometimes not even by women themselves. In order for women to be supported in the work they do, there must be a family and community environment which recognizes women's work as essential, as well as an infrastructure to support it - health care, transportation, child-care, training, and fair policies.

“Everyone thought that women are more depended on now, but get no thanks in return. Our children all seem to stay home longer. Out of seven women who attended this meeting, five have adult children still living at home.”

What Do Women Do, Anyway?

“Most women are responsible for every aspect of child care, home management, and running the fishing business for their husbands. Women look after families, their households, and their husbands. They do the household accounts, fishing accounts, business errands, paperwork, clean fish, attend meetings, and volunteer for community activities. On top of that, most women have had to get jobs, just to put food on the table.”

“Women hold up more than their end.”
RECOGNIZING WOMEN: CONTRIBUTIONS & CONCERNS

Women in the Fishery

Women are involved in the Fishery

Although many assume that the fishery is a man's domain, women have been involved in the fishery for many generations, doing a vast range of jobs. Women

- own and operate fishing vessels
- hold hired positions on boats
- manage family fishing businesses
- are on-call 24 hours a day
- perform many bookkeeping tasks
- attend fisheries policy and quota allocation meetings
- bait trawl
- mend nets
- work in fishplants
- work in many local industries and businesses that rely on the fishery for their survival

“...When I get paid for the work that I do, it makes me feel like my work is valuable. It also makes a big difference to your freedom and sense of self worth when you earn your own money.”

Women are stakeholders

Because women are vital to coastal communities and to the small-scale fishery, women's experience and interests must be acknowledged and respected in any fisheries management plan and in any community economic development plan. Women’s voices are key in discussions that involve conserving a community resource for future generations.

Please see FACTsheet 2B for a further exploration of women's work in family businesses, and FACTsheet 2E for further links between fisheries policies and women in coastal communities.

Women’s role in the Fishery is often dismissed

Women who work in the fishery or as part of a fishing family often suffer even more than other women from a lack of recognition for their work. Women in coastal communities have given many accounts of the ways in which their fishery-related work has been undervalued by members of their own families, communities, and governments. Policies which are discussed in some of the following FACTsheets are seen by many women as unfair and dismissive of the work they do.
Changes in coastal communities, in fishing families, and in the labour market within the past ten years have forced an increasing number of women into unstable part-time jobs. Women tend to be clustered in low-paying occupations as well as being over-represented amongst those working non-standard work hours (part-time/part-year/temporary). 42.4% of all female workers compared to 27.2% of all male workers earned less than $10,000 in 1995. With regard to pay, security, and opportunities for advancement, the majority of part-time jobs are poor jobs.

Married women earn substantially less than married men. The fact that more women than men end up with part-time work is often not a matter of choice. Studies have shown that women perform two-thirds of all the unpaid labour in Canada (see FACTsheet 1B) and tend to be the primary care-givers for children and the elderly.

The value of earning an income for the work you do

Many women around Nova Scotia have emphasized the importance of having their own income, and studies have shown that having an independent source of income is directly related to a woman’s sense of dignity, as well as her sense of equality in a relationship and in society.

Although this view may seem old-fashioned to most people, some people still think women shouldn’t be in the labour market and shouldn’t earn their own income. Many women in rural communities have reported being affected by such attitudes – which exist not just in families and amongst community members, but also in local and regional government offices. Women who work in family fishing businesses are particularly affected by these attitudes because their work has so often been taken for granted.

The repercussions of such attitudes on all women are dramatic. A bureaucrat’s attitude may directly affect whether a woman is able to count what she does as work and receive benefits for it. Lack of income or insecure employment for a woman can easily lead to economic disaster if a marriage ends in divorce, if a partner loses a job, or if a woman is forced to rely on pensions.
RECOGNIZING WOMEN: CONTRIBUTIONS & CONCERNS

Women and Decision Making

Women are involved in more community activities than men. They also and are often the ones to manage family accounts, run family fishing businesses, attend meetings, do research, share information, and are responsible to keep up to date on changing regulations that affect their families. Yet despite their extensive involvement in the community, the family, and the fishery, they are rarely consulted on issues which affect themselves and their communities.

In fact, many women have expressed the view that community people in general have little say in policy decisions which affect the future of their communities. On the whole, women in coastal communities feel that the government has let them and their communities down. The 'Women's Health and Wellbeing Report' summed up women's views about government policies with the following words: "untrustworthy, controlling, unfair, detrimental to community, and unclear."

But women also feel a sense of resignation and are alienated from government. Comments made by many women in coastal communities reflect feelings of powerlessness and lack of involvement in democratic processes. As one woman said in a recent study on women and CED: "Women are often the glue that keeps families and communities together through difficult economic times. Yet there are very few women involved in making economic decisions in community organizations and government agencies. Many of these decisions don't reflect women's priorities or meet women's needs."

Many women do not feel encouraged to give their opinions or to become involved in community, regional, provincial, or federal decision-making processes. This is often the result of a lack of understanding and knowledge amongst decision-makers and some organizations about the contributions women can make. It is also difficult for many women to participate in meetings and conferences without having access to child-care and transportation.

These barriers, as well as an already diminished sense of self-esteem and lack of confidence, an increase in paid and unpaid work, and a decrease in support services and infrastructure all contribute to a state of affairs in which women are feeling both undervalued and excluded.

"And then, there are some people who think that women — women! — should sit at the decision-making table. Well, if this is the case, we might as well invite the Martians to have a seat as well!"

- Representative from a New Brunswick draggers association after hearing the NS Women's FishNet brief
INCLUDING WOMEN: POLICIES, PROGRAMS & SERVICES

Employment Insurance

The 1996 changes to the EI regulations have greatly affected many women in coastal communities, and are a key issue that affect their sense of self-worth, economic stability, access to training, and independence in a relationship. Although some improvements have since been made to the intensity rule and the clawback, the regulations are still unfair to women.

UI/EI - Then and Now

In 1996 the insurance system changed from one based on weeks of work to a system based on hours. Instead of an average of 200 hours, people now need over 500 hours to qualify, in most parts of Canada. Government stated that the new system would lead to greater equity of treatment between those working part-time and those working full-time. But unions and women's advocates were skeptical, and the hours based system was indeed more difficult for people who don't work full-time to qualify for EI.

Ten years ago, 70% of unemployed women were eligible. Today only 30% of unemployed women are eligible. The gap in UI coverage between men and women has widened even more because of the 1996 EI Act. (CLC website)

accommodate their unpaid domestic and care-giving roles. Women end up being penalized by stiffer eligibility requirements. This, in turn, often increases women's economic dependency within a relationship.

Women perform two-thirds of all unpaid work in Canada. It was ruled in the Lesiuk case that the EI entrance requirement based solely on total hours of employment has a natural tendency to exclude more women than men. The other aspect of the new EI hours-based system that leads to a decrease in women who are eligible is the number of hours needed for new and re-entrants. Minimum hours needed increased from 300 (20 weeks at 15 hrs/wk) to 910 hours. Women are more likely to take time out of the labour force or work fewer hours to look after family responsibilities. Once again, this penalizes women for doing unpaid work.

The Lesiuk case is a very important precedent because it acknowledges women's unpaid work. "When contributions to society in paid and unpaid labour are weighed, the part-time employee has expended no less effort than the other individual. However, she is deemed less worthy of employment insurance protection." (Case notes CUB 51142)

"They say, 'Doesn't your husband have a job? Why are you here? Why do you need EI? But then, I bet you the first questions to a male at the office would not be 'Does your wife work?' and 'How much does your wife make?'"
“Workforce Attachment”
How should it be measured?

EI eligibility is based on an individual's 'workforce attachment'. This can be measured in a variety of different ways. Apparently Canada is the only country to use the number of hours worked in a year as the sole qualifying criterion. Generally, the duration of time that one is committed to working in the labour market is a primary factor, and standards such as whether a person is involved in a job search, or is looking for regular employment are other factors which are considered. As stated in the Lesiuk case, "If continuity of employment is utilized as a measure of workforce attachment, then men can be deemed to have a weaker attachment since fewer women than men are frequent claimants for EI benefits."

Women's work in the fishery that has often not been seen as "primary" to the fishery, resulting in women not qualifying for benefits:
• bailing/trawl
• bookkeeping
• marketing
• selling fish
• work in some fish plants
• management
See next FACTsheet 2B for a further exploration of this.

El and Training

People who are ineligible for EI or social assistance are also excluded from most training and skills development opportunities. Due to changes in EI regulations and changing labour market patterns, women have become less eligible for many training opportunities. Women who have been out of the labour force for a number of years often need assistance in becoming job ready or in looking for work but fall through the gaps when it comes to accessing EI-related training. (See FACTsheet 2D for more details)

"Not only have women been excluded from benefits, but many have found the appeals process to be discriminatory and intimidating."

Where is the money that has been paid into the EI system?
• In the past six years, a 30 billion dollar EI surplus has accumulated nationally.
• Many people are asking how the money that has been paid into the EI system is being used. Who is benefiting?
• Are the people who paid in and who are now ineligible for EI benefiting? Are women who need skills development and training to enter or re-enter the labour force benefiting?
• Is access to support services (i.e. transportation, literacy upgrading programs, child-care, etc.) for people in remote communities being improved?

Women need:
• Reforms to EI to enable women in non-standard part-time and contract jobs to be treated fairly so they can access benefits.
• Income security provisions for all women who are employed including including part time and contract workers, self-employed, family members in family operated small businesses, and business owners.
• Better training opportunities for all.
Many women who work in a family fishing business doing things like accounting and looking after all the shore work do not qualify for EI or other benefits because they are not seen to be 'bona fide' workers, or they are not seen as being in an 'arms length' relationship with their employer.

An employee is considered at 'arms-length' if they work under the same conditions as if the employer and the employee were not related. In an arm's length relationship the employee would be paid a wage and given benefits that are based on prevailing labour market standards. The arms-length regulation impacts women more than men in family fishing businesses because the type of work women do is often taken for granted or not considered to be 'real' work, worthy of pay. Women have been disqualified for doing 'extra' work for free, such as going to meetings on the weekends or working for no pay out of season, because this is "not typical" of a regular employer-employee relationship. Many women work in fishing and other family businesses for low or no pay with no benefits because they must, if the business is to survive. Women are also disqualified from access to EI fishing benefits because they don't always work on the boat. Bookkeeping, preparing bait, maintaining the on-shore parts of the business, etc. don't 'count' as part of the seasonal fishing industry. Even several women who do work on the boat spoke of Employment officers hiding in the woods to make sure the women were on the boat.

Women are afraid to speak up and appeal a decision. People don't want to risk the penalties and often can't afford for the claim to stop during investigations. Women also live in fear of 'the clawback'... "When they decided you were eligible and paid you benefits for years, but then changed their minds - and you have to pay it all back." Many women do not question anything for fear that they will be submitted to this retroactive process.

(See FACTsheet 2F for more details about women's treatment by public officers.)
Employment Opportunities in Coastal Communities

With the disintegration of traditional employment and the erosion of both public infrastructure and private businesses, employment opportunities for anyone in NS coastal communities are few and far between. As fewer people have money to spend, businesses are downsizing and many are moving out of the smaller communities. Even basic services such as post offices, banks, and gas stations, are not available in communities where they existed 10 years ago.

Women are often doubly challenged by the lack of employment opportunities; in some areas men have been filling jobs that women traditionally did, i.e. fishplant work. Women also are less likely to qualify for job placement and re-training programs because of the EI regulations. (see FACTsheets 1D, 2A, and 2D). Women often have a harder time leaving a community for work due to other responsibilities at home.

At the same time, many women are increasingly relied upon to earn the bulk of the family income. When their husbands were fishing,

women often took supplementary low-waged part-time jobs to help with expenses, as well as helping with the family fishing business. Now these jobs are often the sole source of family income. Also, women have stated that with the dwindling number of jobs in communities, there is more stress, more jealousy, less security, less opportunity for change and growth, and a far greater potential for employers to abuse their employees. Women have also spoken about having to take whatever job they can. The only available jobs sometimes involve working long hours with no time left over for family, or working nights and weekends in substandard conditions. In one community recently, several women at a local fishplant were treated for chemical poisoning but none were willing to speak out against their employer, knowing that if they did so and lost that job, there would be no other jobs in the community.

"Women play a very important role in the community. Many now are sole breadwinners. Years ago a woman could stay at home and take care of her children. Now, they have no choice. It is very hard today to find a job even with a good education. Our community is small and jobs are few and far between.”

"One of the preferred employment opportunities that we feel the government could actually do something about is to support local fishing peoples to continue fishing, rather than giving companies from outside the community greater access to the resource.”

"Meaningful work that pays fairly and allows for personal growth and challenge is not only important to the individual, but it is vital to the community’s survival.”
Fisheries Policies

Many feel that government fisheries policies have much to do with the ongoing crisis in the groundfishery and the resulting economic downturn in many coastal communities. Recently, DFO published a Discussion Document outlining proposed changes to the industry and to the role DFO plays within the industry. NS Women’s FishNet prepared a brief which was presented at one of the DFO consultations. Many of the ideas on this FACTsheet were outlined in greater detail in our brief. Please contact us if you’re interested in receiving a copy.

Communities, small-scale fish harvesters, and fishing families have been the stewards of the fishery, of its management, and of its ecological and economic sustainability for generations. Historically, entire coastal communities have taken a whole season to harvest what one or two companies profit from in a day, given the present allocation of resources.

In recent years, coastal communities have suffered socially, environmentally, and economically, from the trend in the fishing industry to move toward privatization, buy-out of small-scale fishing families, and increasingly industrialized and destructive fishing practices. These practices may appear to be more efficient, but in the long run they are destructive to the environment and unsustainable for the community.

Fisheries Management

The discussion document advocates a move toward co-management of the fishing industry, defining this as "The sharing of authority and responsibility for fisheries management, and of accountability for results, between DFO and resource users." But this definition of co-management does not include many of the key stakeholders such as anyone with a historical connection to the fishery, coastal communities, women, community businesses, etc.

We recommend that principles of community-based management replace principles of co-management as a guiding force of the new fisheries management policies. According to the Atlantic Network for Community-Based Management, some of the principles which need to be used to support communities that want to regain control of the natural resources surrounding them are: 1. All members of communities — women, men, and children — have a shared interest in the use of the resources around them. The values, goals, and aspirations of all people in communities must be central to decisions regarding the use, and responsible stewardship, of resources; 2. Communities have a responsibility to work together to ensure the region’s resources are managed and used in a sustainable manner; 3. Our resources must be used primarily to sustain moderate livelihoods, not to amass unlimited profits; and 4. Inclusive community participation in democratic decision-making is essential to the existence of healthy and sustainable communities.
Sustainability and Conservation

If sustainability and conservation are to be two of the key building blocks for any discussions about a future management framework for the fishery, they must be clearly defined without leaving any room for misinterpretation. True conservation must protect the habitat of the fishery from various destructive fishing practices. It must look at the future from a long-term perspective. Sustainability must always include the ecosystem and the communities which rely on the fishery for their prosperity.

Who Are the Key Stakeholders?

We recommend that the various types of stakeholders be clearly outlined and defined by looking at the overall impact of fishery management decisions, and in terms of the goals and objectives outlined in the discussion document. Rather than identifying the primary stakeholders as those who at present use and make a profit from the resource, ie. ‘stakeholders in the fishing industry,’ the primary stakeholders should be identified as stakeholders in conservation, in community and resource sustainability, and in maximizing economic and social benefits to the community. Corporate industry stakeholders play only a small part in this overall picture.

Women

Women are key stakeholders in both the fishery and in the community, yet we have been absent or invisible in policies and decision-making processes associated with fishing. Women must be included as stakeholders and treated as equal participants in all decision-making processes affecting the fisheries and fishing communities.

Coastal Communities

Coastal communities have historically been the key ‘resource users’, benefactors, and stewards of the fishery. Coastal communities must be acknowledged as key stakeholders, because the people and the ecosystem in communities have the highest stakes in what happens in the fisheries. The entire ecosystem of the communities — humans, animals, fish, plants and natural resources such as fresh and marine water — have the most to gain and the most to lose in how the fishery is managed.

“DFO seems to be more interested in making the industry sustainable without looking at who benefits from it and how the industry can best help communities to become sustainable.”

Non-fishery related businesses and industries in coastal communities also rely on the economic benefits of the fisheries. If these are taken away, it will not only affect the businesses, but it will also affect the community. The resulting economic devastation is, and has been a main factor in the social and economic demise of coastal communities.
Many women across the province have shared their negative sentiments about the difficulties of accessing information and the oftentimes negative attitudes they have encountered among bureaucrats and government service providers. Throughout the work that FishNet has done during the past five years, we have collected quotes and opinions from women - some of which we have included on this page. The quote above is in some way the most telling, because it is so extreme and all-encompassing. Other comments from women point to a range of problems from sexist attitudes to unclear information to lack of access to vital services. Changing regulations and complicated forms have been mentioned many times as barriers to accessing programs. This specifically affects women and has increased women’s stress, because it is often the women’s responsibility to stay informed about new and changing regulations, even though information is usually directed to organized groups representing the industry. Women speak of learning about changes in policy through word of mouth and television. “They’re big on statistics. They want the applications to be up, but the benefits to be down.”

Women have also spoken about the lack of communication and cooperation between government departments, and how this negatively affects them. Many women are not aware of their rights, so intimidation is easily felt and has long-lasting effects. Women feel that they are often forced into a defensive position by being accused of lying about the work they do. Many feel that the prevailing attitude amongst employment officers is that women are “guilty, unless proven innocent.” Added to the negative experiences many women have encountered is the fact that issues relating to family income are delicate, so they do not speak out about their treatment and experiences with EI claims—often they do not even talk with other women in their communities. There is a definite stigma to being investigated, and in a small community, people often choose the path of least resistance to avoid being judged. Women overall feel that anything they say might be used against them, and that many public officers could use sensitivity training.

“Women in a GED program in the Valley were told if anyone failed the test, they would lose their benefits.”

“Most agreed, it was not a very pleasant experience to apply for EI benefits. HRDC does not have a great reputation for making clients feel comfortable and respected.”

“Some people have never been able to grasp some of the rules – they are very confusing.”

“When I walked in to apply for EI, their first question was ‘What does your husband do?’ Do you think they would have asked him that, if he went in to apply?”
Community Infrastructure and Public Services

Coastal communities in Nova Scotia have suffered from the economic downturn as a result of the fisheries crisis, but added to that, community infrastructure and public services have been consistently eroded. Women are very upset about the cutbacks in services in their communities. One woman describes how this has affected the mental and the physical health of the people: "There are fewer doctors, no VON nurse anymore, no support groups or programs to help people cope, and no accessible information to inform people about possible resources or help. Along with the cutbacks in services, however, there has been an increase in physical and mental abuse and general violence in the community."

This erosion of infrastructure and services ends up putting extra burden on women, who tend to look after children and the elderly, and the various needs of family members and the community.

One woman expressed her dissatisfaction with the services in her community this way: "It seems that government policies are either destroying the community, like dismantling the public wharf and the post office and sending patients home 'sicker and quicker', or policies and services exist to support communities but are inaccessible to those who could use them."

"If you cannot get there, you cannot participate."

"How can you participate if you are not healthy?"

Many women were uninformed about community development initiatives such as RDAs, other CED initiatives, or Regional Health Boards.

"In one focus group, a participant's comment about the lack of public transportation in the community turned into a debate: 'But is there even a transportation policy? I don't think so.'"

"Community infrastructure and accessible public services are 100% necessary for any community economic development and for individual prosperity. How can a democracy work without people being able to access something necessary for their basic needs to be met? How can someone participate in a job search or educational upgrading - even mailing a letter or participating in a meeting without being able to get there?"

Communities Need:
- Public Transportation
- Health Services
- Mental Health Services
- Working Wharves
- Lighthouses
- Post offices
- Community Centres
- Educational Opportunities
- Social Services
- Child Care Services
Nova Scotia’s discussion paper from summer 2000 “Toward Prosperity – Developing an Economic Growth Strategy for Nova Scotia” included two major goals:
- “a vibrant, confident Nova Scotia in which all of its citizens are able to achieve their full potential” and
- “a province of self-sufficient communities”
If our government is to take these goals seriously, many policies need rethinking and revamping. We hope that these fact sheets have outlined some possible directions for change.

Connecting Economic and Social Development, Community Development and Women’s Involvement

Economic strategies to deal with the decline of the fishery in NS’s coastal communities must address social issues, and must include everyone. Governments must take the initiative to acknowledge women’s various roles, and the important contribution women make to sustaining and enhancing a healthy society. Women’s work and participation must be recognized as contributing to the economic stability of communities.

Policy makers can learn from community development strategies to see what works best. “The best public policies will integrate economic and social goals – in the workplace and in society at large... Inclusion, integration, and participation are community and nation building strategies.” (Judith Maxwell, CPRN) Without including everyone and facilitating fair opportunities for women, the foundation for community sustainability will be weakened and flawed. Government must link with women and community partners and support whatever needs to be in place for a more inclusive policy making process.

The Women for Economic Equality Society, one of FishNet’s community partners, has the following definition for Community Economic Development: “CED is about people in communities working together to take more control over their futures and to improve the quality of life for all citizens.”

It is the sum total of all the contributions that an individual makes to society, that should be measured to determine their value and potential in a community - not just that individual's ability to meet an outside criteria for number of hours worked at a 'bona fide' job.

Many successful models exist in which women are valued as key components of successful CED work. In First Nations communities, there is a famous saying: “Before the communities can heal, the families must heal; before the families can heal, the women must heal.” In International Development work, it is commonly acknowledged that women are key to any community development work.
Including Women - Recognizing Difference

In the Kelly Lesiuk case, the EI regulations were found to be in conflict with the Human Rights Act, based on harm being done to human dignity. Ultimately, an acknowledgement of the different circumstances that make up a woman's life was what won this case. It was decided that when a mother works part-time because of her unpaid parental responsibilities, she should not receive inferior employment insurance coverage on that account.

As quoted from the case judgement:
"Human dignity is harmed when individuals or groups are marginalized, ignored or devalued, and is enhanced when laws recognize the full place of all individuals and groups within Canadian Society. Human dignity within the meaning of the equality guarantee does not relate to the status or position of an individual in society per se, but rather concerns the manner in which a person legitimately feels when confronted with a particular law. Does the law treat him or her unfairly, taking into account all of the circumstances regarding the individuals affected and excluded by the law?"

The Woods Harbour Women's Resource Centre and C@P Site... a model to build on with greater support?
"We have VON nurses cutting toenails, in the library - that's a satellite branch of the Western Counties Regional library - right next to the CAP site, the food bank, the women's resource centre, and my office - that's only half of what we do. We also have GED upgrading, adult literacy, our homework club, French immersion peer directed tutoring and support group. But there's virtually no support for what we are doing. It's all women who look after all of this, and it all happens in a 12 x 28 foot room. I get paid for 20 hours a week, work at least 60, and everyone else is a volunteer." Geri Nickerson

"Success needs to be seen as one woman who then has the potential to go on and affect the entire community"
Material from the following sources and groups was used to prepare this series of FACTsheets. Quotes on the sheets were also taken from these sources.

- Canadian Labour Congress
- NS Advisory Council on the Status of Women
- NSACSW "Money Matters" booklet
- Women for Economic Equality/Women’s CED Network
- Feminists for Just and Equitable Policy
- Human Resources Development Canada
- Women’s Employment Outreach
- Coastal Communities Network
- Nova Scotia Women’s FishNet Newsletters
- NS Women’s FishNet Final Report “Women’s Health and Well-Being in Six NS Coastal Communities”
- Shelburne County Women’s FishNet
- Wood’s Harbour Women’s Resource Centre
- Samuel Woods Historical Society
- Case transcripts from the Office of the Umpire in the matter of the EI Act and Kelly Lesiuk and the Appeal to an Umpire by the Claimant from a Decision by the Board of Referees (April 3, 2001)

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Social and Economic Exclusion

Social and economic exclusion happens when people don’t have – and can’t get – the education, jobs, decent housing, health care, and other things they need to live comfortably, to participate in society, and to feel that they are valued and respected members of their community.

Social and economic exclusion can keep whole groups of people on the outside looking in. Single mothers and their children, youth, aboriginal people, racial and cultural minorities, gays and lesbians, fragile seniors, people who are sick, disabled, unemployed or homeless, and people in rural or remote places are among those who feel that they don’t belong and aren’t welcome in their own communities.

Adding insult to injury, too many of us think that it must be their own fault if these people can’t "make it." We blame them for their own exclusion.

Poverty is its bedrock, but social and economic exclusion is about more than just poverty.

Social and economic exclusion is a vicious cycle that traps people who are poor and whose poverty cuts off their connection to their community. And because the community does not hear the voices of the poor, it is less likely to develop policies to address the causes of poverty and exclusion.

Exclusion is a complex and crushing problem. It leaves many people out of the social and economic life of their community - people whose insights and experiences could enrich us all.
Social and Economic Inclusion

Adequate income, education and a network of relationships enable people to participate as valued members of society.

If poverty, disability, unemployment, lack of education or lack of connection result in exclusion, then inclusion must be a process that overcomes these barriers. Inclusion involves the people who feel powerless and cut off from their community.

Social and economic inclusion is both a goal and a process. It welcomes individuals and groups who have been left out into the planning, decision-making and policy-development processes in their community. And it empowers them by offering the opportunities, resources and support they need to participate.
Costs of Social and Economic Exclusion

Our economy depends on social well-being – a healthy, educated society is the basis of a healthy economy.

Social and economic exclusion undermines the well-being of individuals and communities. It sets up economic and social barriers that are difficult to break down and that create long-term effects on – and costs to – individuals and communities. For example, unemployment has health and social impacts as well as the obvious financial ones because work is so important to our self-esteem and social status. Inadequate learning opportunities and health care in childhood have long-term financial effects – children who lack these basic supports are less likely to find jobs as adults. The effects of one barrier cause further exclusion, leading to still more social isolation and poverty.

Social and economic exclusion is both a cause and an effect of poverty, poor health, unemployment and crime. All of these have costs and we all pay.

• **Poverty.** The National Longitudinal Survey on Children and Youth and the National Population Health Survey directly related poverty to 31 indicators of poorer outcomes in health, education and employment. Children from low income families are more likely to have low birth weights, poor health, high rates of injury and hyperactivity, delayed vocabulary development and poor employment prospects. This increases the likelihood that these children will themselves be poor as adults. Poverty, in turn, leads to more health, social and educational problems and yet more poverty and isolation. Poverty is expensive.

• **Poorer health.** Poverty is our most reliable predictor of poor health, for both adults and children. No matter which measure of health you use, poor people have poorer health status and die sooner than other Canadians. Poor health leads to heavier use of the health care system and more hospital admissions, both of which cost money.
• **Unemployment.** Unemployment is clearly linked to poorer health outcomes, stress, domestic abuse, child neglect and crime. In 1994, a national study estimated that in 1993, unemployment had cost the Canadian economy $109 billion. That's 15.5% of the GDP or nearly $4000 annually for every Canadian. There are also indirect costs in health, justice, education and other areas that cost each of us another $1000 per year. The same study found that for each one percent increase in unemployment, Canadians paid $14.2 billion in direct costs, or $514 each. ¹

• **Crime.** Crime is another outcome of social and economic exclusion. For example, robbery rates have increased throughout Canada since the mid-1960s in direct proportion to the increase in unemployment. ² Individual victims bear some of the costs of crime – in suffering, lost-productivity and financial loss. Communities bear other costs – for example, police, court and correctional costs. And these costs are considerable. Nationally, "... crime costs more than twice what we spend on supporting unemployed people through the Employment Insurance program. It is more than the government of Canada spends on pensions for seniors ($15.8 billion), the child tax benefit ($5 billion), the Canada Assistance Plan ($7.4 billion) and child care ($5.5 billion) combined." ³

All of these impacts of social and economic exclusion are linked. Poverty leads to poor health. Poor health leads to unemployment. Unemployment leads back to more poverty, and to increased crime and violence. All of these create costs that we pay now and that our children will continue to pay.

Exclusion has social as well as financial costs. As the number of excluded people grows, their individual problems affect the health and well-being of society. The growing gap between rich and poor sets up an "us" and "them" situation – a breakdown in our sense of community that makes us all feel less secure.

² Social Investment: A New Brunswick Discussion Kit, p. 10.
Participation

Participation is a basic element of democracy. However, we often use the terms "citizen participation" and "community consultation" loosely when discussing the role of communities in policy development or decision making. Depending on who’s talking, participation can mean anything from offering information to active decision making.

**Climbing the Ladder of Participation**

The different levels of participation are like the rungs of a ladder. They range from no participation to control by the community. Climbing this ladder of participation takes effort, energy, support and cooperation.

**Non-participation** is the bottom rung on the ladder of participation. If the government or agency doing the planning offers any information at all, it is only to tell the community what's going to happen. The government or agency does not consult the community and expects community members to do what they're told.

**Information** is a step up from non-participation, but only a small step. The planners give information to the community, tell them about their rights and responsibilities and may even ask for their opinion. But the community's support is not necessary and the planner still expects community members to do as they're told.

**Consultation** involves asking for feedback and seeking community support. However, although the government or agency consults the community, the government or agency has no obligation to take community advice. Regardless of community input, planners will modify or change plans as they see fit. At this level of participation, individuals from the community may have some role in developing plans, but they are not community representatives.
Partnership requires that the community and the government or agency share decision-making as more or less equal partners. The government or agency may define the issue and present a tentative plan. However, this is subject to community approval and the community may change the plan.

Delegated power requires that the government or agency turn some level of control over to the community. The government or agency may define the issue and tell the community what support it can offer. The community is then able to make and carry out its own plans within these limits.

Control is the highest level of participation. At this level, the government or agency provides resources and the community identifies issues, and decides what to do and how to do it. The community decides on the structure, process and resources for implementing its own solutions.

Information and consultation are token levels of participation. Partnership, delegated power and control are degrees of actual power in which the community has a role and the government or agency implements a process for involving those with a stake in the issue. True participation requires that ordinary people achieve some degree of control, power or partnership.

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Participation and Community Development

True community participation is the most basic requirement of social and economic inclusion and is an essential element of the democratic process.

Full participation is not easy for people who have been excluded from mainstream society. They have had little opportunity to develop the skills and confidence they need to participate on the boards and committees that make up our decision-making process. Many are afraid to participate - they fear that they won't fit in and others in the community will judge them harshly. This means that too many people are recipients rather than participants, with little say in determining the policies and services that directly affect their lives.

As well, the very process governments and agencies use to gather public input can put barriers in the path of those already excluded.

- There are financial barriers presented by childcare and transportation costs.
- There are social barriers that make people feel that they have no right to participate -- for example because of poverty, disability or lack of education.
- There are structural barriers. Governments and other agencies do not often have internal structures that encourage participation. For example, if the government or agencies manage staff members who are responsible for public participation in a top-down, traditional way, they are likely to try to "manage" the public in the same way.

Overcoming these barriers is not easy. Inclusion requires meaningful participation, but participation is difficult when there are real differences in the power, wealth and status of the participants. The inclusion process must involve those who are outside the circle of participation, people with the hopeless feeling that the odds are against them and no one listens anyway. To participate effectively, they need the support that will enable them to see the point of participating, to be willing to do so and to develop the skills they need.
Community development can help overcome these barriers.

Simply locating a program or service in a community will not guarantee community participation. This is especially true if the government or agency involved defines the problem, develops a solution and then invites citizens to participate. Community development is the process that enables community-based programs to be truly participatory.

The government or agencies cannot impose community development from the top down. It must be nurtured from the bottom up. The best solutions usually come from the community itself.
What is Policy and Who Makes It?

Policies are rules - the steps, procedures, guidelines, directions, etc. - that set out what and how something is to be done. The values and beliefs of policy makers shape the policy they make. They do not always reflect the values of those community members who, as a result of social and economic exclusion, are unable to participate.

Public policy sets directions for the whole population. The laws and regulations that guide our social, health and economic programs interpret this public policy.

Public policy development is meant to be a collaborative process. It is the result of a cycle of interactions by:

- Elected representatives who set policy
- Bureaucrats and officials who interpret policy and develop regulations
- Managers who implement it
- Service providers who carry it out
- Citizens affected by they policy give feedback and advocate for change

An inclusive policy process requires that everyone affected by a policy be included as a full participant in its development. One result of social and economic exclusion has been that relatively few people are part of the policy development cycle. Widening the circle of participation will mean that public policy will more clearly reflect the values and experience of the entire community.

And this broader range of values will translate into public policy that puts new ideas, practices and attitudes into action.
Social Investment

Social investment is the commitment of public funds to develop and support the institutions, relationships, attitudes and values that contribute to the economic and social well-being of people and communities.

A healthy economy requires a healthy society. The factors that contribute to a healthy economy also contribute to a healthy society. These are:

- **Productivity**: Productivity is the output per worker. Economists believe that increasing productivity is the best means of raising the standard of living. In social terms, being a productive, useful member of a community is an essential part of health and well-being.

- **Income distribution**: A growing gap between a few rich people at the top and a large group of poor at the bottom is a sign of an unhealthy economy. It is also an indicator of an unhealthy society -- health status improves at each step up the income ladder. Societies that are prosperous and have an equitable distribution of income have the healthiest populations.

- **Employment**: High unemployment means that a society is not using its productive workers and that young people have a difficult time entering the work place. High unemployment also breeds persistent poverty and all of the social problems that accompany it.

Social investment is based on the understanding that strong economic and social structures will develop when individuals, organizations, institutions and communities cooperate for mutual benefit. Public policies that support cooperation and collaboration will build both sustainable communities and strong local economies.

A society does not make social investments at the expense of the private sector. Social investment benefits everyone – the rich and the poor, the able and the challenged, the young and the old. It is an investment in society that will ultimately strengthen the economy.

Although the private sector can and should invest in the well-being of their communities, citizens rely primarily on government for social investment. The government’s role is to develop policies that balance social and economic development and to invest in the public services that all of us, including the private sector, depend on.
Social investment gives prevention and health promotion the highest priority because they offer a high return on the dollar. Early interventions that improve social well-being, raise literacy levels, provide meaningful work and prevent crime are far more effective, and less expensive, than services that deal with the consequences of crime, abuse, delinquency, drug use, illiteracy, and other outcomes of social and economic exclusion. Preventive spending will avoid the costs of future exclusion.

The Perry Pre-School Program, a study conducted in Illinois over nearly 40 years, is one of the best-known examples of the economic benefits of social investment. The Perry Pre-School Program offered enriched support to pre-school-age children in a low-income neighbourhood. The Program matched these children with others who had not received the enriched program and followed their development into adulthood. An analysis by the Canadian Centre for Justice Statistics found that participants in the Perry Pre-School Program did better in school, had higher rates of employment, earned more, relied less on social assistance and had reduced crime rates as youths and into adulthood. An investment of $5000 in early childhood education yielded an estimated $28,000 in savings to society.

Government policy does make a difference. In New Brunswick, government policies and initiatives have more than halved the rate of poverty among seniors since 1980. Today, New Brunswick has one of the lowest rates of senior poverty in Canada. ¹

Along with funds and wise policy making, people and communities need investments of trust, time, attention, respect, and resources to realize their full potential.

Lately, governments have directed policies at reducing spending so we do not pass on unnecessary debt to our children. Promoting and renewing policies that support social investment will ensure that our children do not inherit the costs and consequences of poverty, ill health, illiteracy and crime.

¹ Social Investment: A New Brunswick Discussion Kit, p. 13.
Measuring Progress and Well-Being

As governments develop socially inclusive policies and make social investments, we will need ways to measure their impact on economic and social progress and well-being.

Commonly used measures of economic growth like the Gross Domestic Product (GDP) are poor indicators of social progress or well-being. The GDP counts all economic activity as growth, whether it contributes to our well-being or degrades our quality of life. As measured by the GDP, sickness contributes more to economic growth than health because we spend money on drugs, doctors and hospitals. Crime contributes more than peace and harmony because we spend more on prisons, police, lawyers, burglar alarms and bodyguards. The GDP also does not take income distribution into account and can hide a growing gap between rich and poor behind an illusion of prosperity.

So how would we go about developing a better process for measuring genuine progress? A good start would be to:

1. Involve citizens throughout the process.
2. Secure top political involvement and commitment.
3. Develop a broad-based, holistic vision of the kind of society citizens want.
4. Develop societal goals that support this vision.
5. Use objective and subjective indicators that are:
   • Relevant to stated goals
   • Unambiguous
   • Based on accurate, available and accessible data that is comparable over time
   • Comparable to thresholds and targets
   • Relevant to the needs of potential users
   • Understandable by potential users
7. Guard against using too few (less than 20) or too many (more than 100) indicators.
8. Draw a clear picture of change over time by using historical data and future targets so we can quickly understand the movement towards or away from goals.
9. Present indicator information in a simple, understandable format.

Inclusive approaches to measuring social progress and well-being are being developed using the best available methodologies and integrating existing data sources. They will continue to evolve as better methodologies and data sources become available.

The Genuine Progress Index (GPI), developed in Nova Scotia, is one innovative approach to measuring social progress and well-being.

The Nova Scotia GPI consists of 22 social, economic and environmental components, including population health, the value of unpaid voluntary and household work, the value of leisure time, four natural resource accounts, and measures of environmental quality, educational attainment, livelihood security and income distribution. Unlike the GDP, the GPI counts crime, pollution, sickness, greenhouse gas emissions and other liabilities as costs rather than gains to the economy and to society. The GPI goes up if society is becoming more equal, if people have more free time, and if the quality of their life is improving.

The GPI provides a practical, policy-relevant measure of progress that is more comprehensive and accurate than measures based on the GDP. The GPI is based on the understanding that what we measure is a sign of what we value. If we do not value our non-monetary, non-material assets enough to count them, they won't count for much when we develop policy.
Ten Building Blocks for Inclusive Public Policy

A result of social and economic exclusion is that we leave the people most affected by public policy out of the process that develops it. We do not hear their voices and policy does not reflect their values and experiences.

So how can policy makers create policies that ensure inclusion? Is there a way to include those who have been previously excluded in the design and implementation of social and economic policies?


1. Political Will
   A strong political commitment to inclusion and inclusive policy-making is necessary at every level of government. Governments need to reflect this political will in public statements committing them to work toward inclusive decision-making processes.

2. Leadership
   Political and bureaucratic leadership is essential if government agencies are to embrace the shift in approach and attitudes called for by inclusive policies.

3. Organizational Readiness
   As an inclusive, collaborative process evolves, organizational structures must change too. As communities become stronger in response to an inclusive policy process, governments and service-providing bureaucracies will need a parallel internal development process. Organizations need to make it clear to both management and service delivery staff that engaging the community is an expected part of their work.

4. Collaboration
   The public, private and non-profit sectors must work together - and must work with the community - to ensure an inclusive process.

Collaboration and intersectoral action require that organizations and agencies be able to share information and to work together across departments.

Collaboration with communities is essential, but the government and other agencies cannot force partnerships and collaboration on communities. Policy makers are in a good position to see possible alliances, but it is up to the communities to decide what will work for them.

5. Relationship Building
   Inclusion, by its very nature, involves active
efforts to build new relationships based on respect and understanding. It also involves strengthening existing relationships between communities and systems.

6. **Community Capacity Building**
Capacity building means investing in the community’s ability to find solutions, create initiatives, and develop leadership, partnerships and collective problem-solving at the community level. The goal of capacity building is to put the community in the driver’s seat, enabling it to become aware of its collective strengths and opportunities.

7. **Respect for Community**
As community capacity grows, relationships with governments change in ways that can be challenging to both communities and the government. At their core, community development and capacity building are about the transformation of both people and social policy. Although this kind of change is not easy for either partner, governments must acknowledge and respect the power of communities to achieve this transformation.

8. **Commitment to Healthy Public Policy**
Concern for health, equity and achieving results guides healthy public policy. It is informed by evidence. Healthy public policy emphasizes prevention rather than treatment and bases social policy programs and services on a population health approach that recognizes the broad determinants of health.

9. **Investment in Communities and People**
Communities need money to make things happen. However, social investment is more than merely financial. It is the investment of trust, time, attention, respect, and policies that enable people and communities to realize their full potential.

10. **Measurement of Results and Progress**
Methods of measuring the effectiveness of inclusive policies and programs should be as innovative as the policies themselves. Rather than just talking about accountability, we need to develop mechanisms that measure the real results and genuine progress – both quantitative and qualitative – and to be able to evaluate results and progress over the long term.