

# Community Health Indicators Toolkit



*This project was made possible by funding from the following organizations: Canadian Institutes of Health Research (Institute of Aboriginal Peoples' Health and Institute of Population and Public Health), Saskatchewan Health Research Foundation and Northern Medical Services, University of Saskatchewan.*



## Community Health Indicators Toolkit

**Published by:**

Saskatchewan Population Health and Evaluation Research Unit

University of Regina & University of Saskatchewan

[www.spheru.ca](http://www.spheru.ca)

December 2006

ISBN: 978-0-9780261-2-7 (hardcopy binder)

ISBN: 978-0-9780261-3-4 (CD ROM)

This publication is also available on the internet at [www.spheru.ca](http://www.spheru.ca)

**For additional copies of this publication, please write to:**

SPHERU

University of Regina – Prince Albert Site

Box 2830

Prince Albert, Saskatchewan

Canada

S6V 7M3

E-mail: [spherupa@sasktel.net](mailto:spherupa@sasktel.net)

Fax: (306) 953-5305

**To cite the *Community Health Indicators Toolkit*, we suggest the following format:**

Jeffery, B., Abonyi, S., Hamilton, C., Bird, S., Denechezhe, M., Lidguerre, T., Michayluk, F., Thomas, L., Throassie, E., Whitecap, Z. (2006). *Community Health Indicators Toolkit*. University of Regina and University of Saskatchewan: Saskatchewan Population Health and Evaluation Research Unit.



# Acknowledgements

The research team would like to thank the leadership and membership of the participating communities for welcoming us into their communities and for their practical assistance and insightful contributions to the project.

This project was made possible by funding through grants from the following organizations:

## **Canadian Institutes of Health Research (CIHR)**

- Canada's major federal funding agency for health research. This project was funded by two of the institutes:

### **Institute of Aboriginal People's Health (IAPH)**

- supports research to address the special health needs of Canada's Aboriginal people

### **Institute of Population and Public Health (IPPH)**

- supports research into the complex interactions (biological, social, cultural, environmental) which determine the health of individuals, communities, and global populations

## **Saskatchewan Health Research Foundation (SHRF)**

- provincial government-funded agency responsible for funding health research in Saskatchewan
- encourages and facilitates research in the health sciences, health-related social sciences, and other health-related fields
- provides funding to individuals and agencies working on research projects that are consistent with a provincial health research strategy

## **Northern Medical Services (NMS), University of Saskatchewan**

- one of three divisions of the Dept. of Family Medicine, College of Medicine, University of Saskatchewan
- works with district Health boards and Tribal Councils in the north to liaise with other health care personnel, local community committees and other agencies who provide services to the community

## Researchers

### **Principal Research Team**

Bonnie Jeffery, Ph.D., Faculty of Social Work and Saskatchewan Population Health and Evaluation Research Unit, University of Regina  
Principal Investigator

Sylvia Abonyi, Ph.D., Department of Community Health and Epidemiology and Saskatchewan Population Health and Evaluation Research Unit, University of Saskatchewan  
Co-principal Investigator

Colleen Hamilton, Saskatchewan Population Health & Evaluation Research Unit  
Project Coordinator

### **Saskatchewan First Nation Partners**

This multidisciplinary and collaborative project was undertaken in partnership with three First Nations health organizations: Prince Albert Grand Council (PAGC), the Athabasca Health Authority (AHA) and the Northern Inter-Tribal Health Authority (NITHA). The PAGC, AHA and NITHA managers were members of the research team.

#### **Prince Albert Grand Council, Health & Social Development**

Ernest Sauve – Director  
Anne Unsworth – Community Health Manager

#### **Athabasca Health Authority**

Georgina MacDonald – Chief Executive Officer

#### **Northern Inter-Tribal Health Authority**

### **Academic Partners**

Shannon Avison, First Nations University

Georgia Bell-Woodward, Saskatoon Health Region

Ronald Labonte, Ph.D., University of Ottawa

George Maslany, Ph.D., University of Regina

Michael McCubbin, Ph.D., Laval University

Nazeem Muhajarine, Ph.D., University of Saskatchewan

**Research Assistants**

Shawn Ahenakew

Kim Ahenakew

Jori Cachene

Marcy Burka-Charles

Julian Miller

Nuelle Novik

Charity Peterson

Andrea Sanderson

Nadia Stadnyk

Leigh Tomilin

Sue Wilson-Cheechoo

## Introduction

In the process of conducting the 2002 evaluation of transferred health services from First Nations and Inuit Health Branch (FNIHB) to the Prince Albert Grand Council (PAGC) in Saskatchewan, PAGC health managers expressed a desire to address questions beyond the scope and capacity of the evaluation that they felt were relevant to the ongoing development of health services in their member communities. They were especially interested in the issue of the health effects of other human services on community health and wellness. PAGC health managers were also interested in determining what information communities could collect to track and monitor their progress in the area of community health outcomes.

The First Nation's Health Development: Tools for Program Planning and Evaluation project was built upon the 2002 evaluation to consider these issues. The primary objectives of this research project were 1) to develop an evaluation framework and 2) to develop indicators for use by First Nations health organizations to track the effects of health and human service programs under their jurisdiction. The outcome of this research project is the Community Health Indicators Toolkit.

The Community Health Indicators Toolkit is, in essence, the evaluative framework manual. It was designed to assist with the identification and collection of data, based on the framework domains and indicator categories, that would help measure progress on improving community health.

This section will help you navigate through the toolkit as you review the Community Health and Wellness Evaluative Framework and indicators that have been developed as part of this research project. Many indicators will be relevant to your community. However, this framework can also act as a guide to help you develop other indicators that reflect the uniqueness of your own community.

### **What is a Framework?**

A framework is simple model of complex things. Much like a house plan starts with a simple outline of its walls and rooms, the finished house with furnishings is much more complicated. A framework for community health indicators is similar. It is a simple model of complex social, cultural, economic and environmental relationships and behaviours that effect the wellness of a community.

This Community Health Indicators Framework organizes the concepts of community health described by community members into key areas (domains) with proposed measurements (indicators). These indicators can then be tracked over time to see if there have been changes, allowing for evaluation of progress. When used in this way the indicators framework becomes an Evaluative Framework.

## Structure of the Toolkit:

The toolkit consists of:

1. a **diagram** of the Evaluation Framework
2. a **section on each of the domains** of community health and wellness with their associated indicators
3. A **Methods** section, which provides detailed information on the research process.

Further descriptions of the Evaluative Framework and the domain sections appear below:

### What is an Indicator?

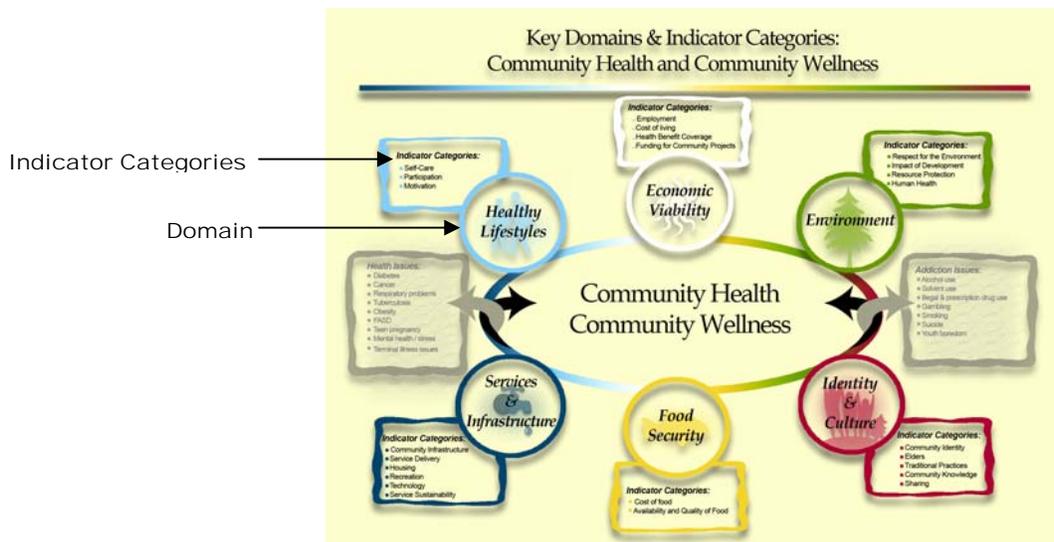
An indicator is a measure of something. It is usually a number, but not always. Letter grades in school are an indicator but not a number.

For example, **playing sports** was one of the activities identified as contributing to a healthy lifestyle. People playing sports could therefore be an **indicator of a healthy lifestyle**.

### 1. The **Evaluation Framework Diagram** identifies:

- the key factors (**domains**) which impact the health and wellness of a community
- the specific areas within each domain (**indicator categories**) identified as playing a role in community health and wellness
- the important individual health and addiction issues affecting the health and wellness of the community

**Figure 1 – Evaluation Framework Diagram**



2. The **individual domain sections** of the manual include:

- a) a **description** of the **domain** and a list of the indicator categories (see *Figure 2*)
- b) a numbered list of community **proposed indicators** within the domain, grouped by **indicator category** and **issue areas** (see *Figure 2*)
- c) a set of **Data Sheets**, which organizes the indicators within each category into an indicator table (see *Figures 3 & 4*)
- d) a list of **data source references** that identify the source of the specific question, measure, or existing data that is listed in the indicator table (see *Figure 5*)
- e) a **Tool Sheet**, which provides an example of a how one might collect data and calculate a value for a specific indicator (see *Figure 6*)

#### **What is a Domain?**

A domain is a major category that has been identified as being an important area that affects health. A domain identifies key issues that need to be measured by specific indicators.

For example, **Healthy Lifestyles** was identified as a **key area that affects both individual and community health** and is therefore a domain of community health and wellness.

## How to Use the Toolkit

As you look at the framework diagram, you may be interested in finding out more about one area that affects the health and wellness of a community. For example, people spoke about how participating in social and physical activities is part of a healthy lifestyle. The toolkit identifies ways in which communities proposed that participation levels in social and physical activities could be measured.

The **participation** indicator category of the Healthy Lifestyle domain contains a number of community-proposed indicators that statistical information can be collected on to measure participation, as it relates to a healthy lifestyle. You may want to find out if any of these indicators would be useful measures in your community. The steps outlined in the following pages show how you would use the toolkit to do this.

#### **How are Indicators Used?**

Collecting information on indicators can provide data to enable decision-making, set priorities, or evaluate the progress of a plan or program.

For example, measuring the level of participation in sports activities can help determine whether a desired participation level is being met, or if a specific program is having the desired effect. Measuring activity levels of different groups, like Elders or youth, can help identify whether these groups are being served by existing programs.

Step 1

- **Go to the Healthy Lifestyles section of the toolkit**, which is identified by a tab in the binder.
- As you flip to the Healthy Lifestyle section, you will see that the **first page** provides a description of the Healthy Lifestyle domain, and lists numbered indicators under each indicator category (**see Figure 2**).
- Looking at the Participation category, you will see the list of indicators (numbered 9 – 15) that relate to Participation.
- You will note that these indicators have been further grouped under “Social Activities” and “Elders and Youth”. These are areas in which issues have been identified that relate to specific participation indicators.

**Figure 2 – Domain Description & Indicator List**

**Healthy Lifestyles**

Healthy lifestyles relate to positive personal life choices that include proper diet and physical activity and that build respectful healthy relationships with family and community. It involves making life choices that contribute to and foster the development of positive self-esteem within the individual.

---

**Indicators:**

<b>Self Care</b>	4 – appointments kept up missed	9 – participation in community events	<b>Motivation</b>
<b>Healthy Eating</b>	5 – comfort disclosing health issues	10 – organizing/volunteering at events	<b>Programming</b>
02 indicators proposed	<b>Healthy Home</b>	<b>Physical Activities</b>	16 – activities available
<b>Healthy Socializing</b>	6 – keeping regular bedtime hours	11 – walking	17 – programs cancelled
02 indicators proposed	7 – limiting TV/video game use	12 – weight and fitness training	18 – program participation and retention
<b>Healthy Self-Image</b>	<b>Hygiene</b>	13 – playing sports	19 – age range of participants
1 – girls saying no to sex	8 – practicing good personal hygiene	14 – skating	<b>Promotion</b>
<b>Medical Treatment</b>	<b>Participation</b>	<b>Elders &amp; Youth</b>	20 – direct contacts to provide information
2 – taking medications as prescribed	<b>Social Activities</b>	15 – Elderly/youth activities	<b>Environmental Concerns</b>
3 – attendance at support groups			21 – walking groups

... continued on next page

Step 2

- **Go to the Healthy Lifestyles Data Sheets**, which follow the indicator lists of the Healthy Lifestyle section.
- Flip through the Data Sheets to the beginning of the Participation indicator category, identified in the title line: **Health Lifestyles >> Participation** (see Figure 3).
- The Participation indicator category is further broken down under **issue areas**: Social Activities (indicators 9 &10); Physical Activities (indicators 11-14); and Elders and Youth (indicator 15).
- A description of the **issues identified** is provided below the title line, in italics.

**Figure 3 – Data Sheet Identification**

The diagram shows a data sheet layout with the following components:

- Domain:** Healthy Lifestyle
- Title Line:** Healthy Lifestyle >> Participation >> Social Activities
- Issues Identified:** *Being active and involved in the community through cultural, spiritual, social, recreational and sporting events.*
- Indicator Category:** Participation
- Issue Area:** Social Activities
- Issues Identified:**
  - Indicator # 9: Attendance / participation in community events
  - Indicator # 10: Organizing or volunteering at community events

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
9	Attendance / participation in community events	Local survey required
10	Organizing or volunteering at community events	Local survey required – suggested questions: A) CBM: Community-Based Monitoring Project Question 28/21 - How many times have you volunteered for a community event (e.g. feast/helping Elder) in the last year?

**Data Sources:**

A) CBM: Community-Based Monitoring Project (Adult survey: page 23 in document; page 26 in PDF) – Question 28  
Find source at: [http://www.wkss.nt.ca/HTML/08\\_ProjectsReports/PDF/CBMFinal2002.pdf](http://www.wkss.nt.ca/HTML/08_ProjectsReports/PDF/CBMFinal2002.pdf)

A) CBM: Community-Based Monitoring Project (Youth survey: page 34; page 37 in PDF) – Question 28  
Find source at: [http://www.wkss.nt.ca/HTML/08\\_ProjectsReports/PDF/CBMFinal2002.pdf](http://www.wkss.nt.ca/HTML/08_ProjectsReports/PDF/CBMFinal2002.pdf)

Step 3

- The Participation indicators are contained in an **indicator table**, which appears just below the description of the issues identified (**see Figure 4**).
- The indicator tables contain existing statistical data on northern Saskatchewan communities and suggested questions or measures that could be used to perform a community based survey.
- A data map of existing data directs you on how to find it online. Follow each step of the data map to find the relevant information, or the closest possible site where you can contact someone to gather that data.

**Figure 4 – Data Sheet Indicator Table**

Indicator Table

### Healthy Lifestyle

Healthy Lifestyle >> Participation >> **Physical Activities**

**Issues Identified:** *Participating in recreational activities that involve physical exercise and fitness.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
11	Walking	<b>Local survey required – suggested questions and existing data found at:</b> <b>A)</b> RHS Adolescent/Adult/Child survey: Question 33-/54-How often do you participate in any kind of physical activity (either at school or at home, or in your free time? - <b>Community level data for RHS survey exists: must be accessed by community.</b>
12	Weight and fitness training	<b>Local survey required – suggested questions and existing data found at:</b> <b>A)</b> RHS Adolescent/Adult/Child survey: Q35/53/55-What types of physical activities have you participated in during the last 12 months? (List of activities) - - <b>Community level data for RHS survey exists: must be accessed by community.</b>  <b>B)</b> <a href="http://www.statscan.ca">http://www.statscan.ca</a> >> (English / French) >> Community Profiles >> 2001 Aboriginal Peoples Survey Community Profiles or 2001 Aboriginal Population Profile >> Choose a community
13	Playing sports	<b>Local survey required – suggested questions and existing data found at:</b> <b>A)</b> RHS Adolescent/Adult/Child survey: Q 68-/56-Outside of school hours, how often do you: ... Take part in sports teams or lessons - <b>Community level data for RHS survey exists: must be accessed by community.</b>  <b>B)</b> <a href="http://www.statscan.ca">http://www.statscan.ca</a> >> (English / French) >> Community Profiles >> 2001 Aboriginal Peoples Survey Community Profiles or 2001 Aboriginal Population Profile >> Choose a community

Indicator

Data Sources

Data Map

Step 4

- Listed at the end of each group of indicator tables, are the **data source references**, where the information was gathered (**see Figure 5**). This is a direct reference to the source of the specific question, measure, or existing data that is listed in the indicator table. Keep in mind that online sources often change and you may have to visit the original site and find the specific document yourself.
- Each information source in the indicator tables is assigned a letter such as A), B), C), etc. The letter in the indicator table and the letter in the data sources are matched, so you can find the specific data source for each piece of information in the indicator table.

**Figure 5 – Data Source References**

		Profiles or 2001 Aboriginal Population Profile >> Choose a community
13	Playing sports	Local survey required – suggested questions and existing data found at: A) RHS Adolescent/Adult/Child survey: Q 68/-/56-Outside of school hours, how often do you: ...Take part in sports teams or lessons - <i>Community level data for RHS survey exists: must be accessed by community.</i> B) <a href="http://www.statscan.ca">http://www.statscan.ca</a> >> (English / French) >> Community Profiles >> 2001 Aboriginal Peoples Survey Community Profiles or 2001 Aboriginal Population Profile >> Choose a community
14	Skating	Local survey required

First Nation's Health Development Toolkit Healthy Lifestyles Page 9  
 December 2003

**Data Sources:**

A) RHS: First Nations and Inuit Regional Longitudinal Health Survey (Adult survey) – Questions 63  
 Find source at: [http://www.naho.ca/firstnations/english/pdf/key\\_docs\\_adult.pdf](http://www.naho.ca/firstnations/english/pdf/key_docs_adult.pdf)

A) RHS: First Nations and Inuit Regional Longitudinal Health Survey (Adolescence survey) – Questions 33/35/68  
 Find source at: [http://www.naho.ca/firstnations/english/pdf/key\\_docs\\_adolescent.pdf](http://www.naho.ca/firstnations/english/pdf/key_docs_adolescent.pdf)

A) RHS: First Nations and Inuit Regional Longitudinal Health Survey (Child survey) – Questions 54/55/56  
 Find source at: [http://www.naho.ca/firstnations/english/pdf/key\\_docs\\_children.pdf](http://www.naho.ca/firstnations/english/pdf/key_docs_children.pdf)

B) Statistics Canada: 2001 Community Profiles. Find source at: <http://www12.statcan.ca/english/profil01/PlaceSearchForm1.cfm>

Data Source References

Data Map to Reference

Step 5

- Finally, at the end of each domain section a **Tool Sheet** has been created to provide an example of how one might collect and interpret data to measure a specific indicator (see Figure 6).
- The Tool Sheet contained in the Healthy Lifestyle domain uses indicator #13 – Playing Sports as an example.

**Figure 6 – Tool Sheet**

**Healthy Lifestyle**

Healthy Lifestyle >> Participation >> **Physical Activities**

Issues Identified: Participating in recreational activities that involve physical exercise and fitness.

Proposed Indicator: **# 13** – Playing Sports

Suggested Measure: Compare the desired participation rates in recreational activities with current participation rates.

Information Source: Existing data and suggested questions that could be used in a local survey are provided below. These are focused on children (6-14). Limitations to the existing data are noted below (see \*).

A) RHS Adolescent/Adult/Child survey: [http://www.naho.ca/firstnations/english/pdf/key\\_docs/adolescent.pdf](http://www.naho.ca/firstnations/english/pdf/key_docs/adolescent.pdf)  
Question 88 - Outside of school hours, how often do you: ...Take part in sports teams or lessons?  
Note: Community level data for RH S survey exists; must be accessed by community.

B) <http://www.statscan.ca/> >>> (English / French) >> Community Profiles >> 2001 Aboriginal Peoples Survey Community Profiles >> Choose: Child / Saskatchewan / Choose a Community

How often child plays sports per week:	
Never or less than once (%)	
One or more times (%)	

C) For specific recreation information that includes past and upcoming events in the Atabasca region go to <http://www.nrcs.sk.ca/>

---

*How to use this measure:*

Step 1) Identify the desired rate of participation in sports activities for the age group (example: 6-14; 15-18).

Step 2) Determine the current rate of participation for the age group, by using existing data (as in the

An excerpt from the  
Healthy Lifestyle Tool  
Sheet

## Notes About a Few of the Surveys and Existing Data

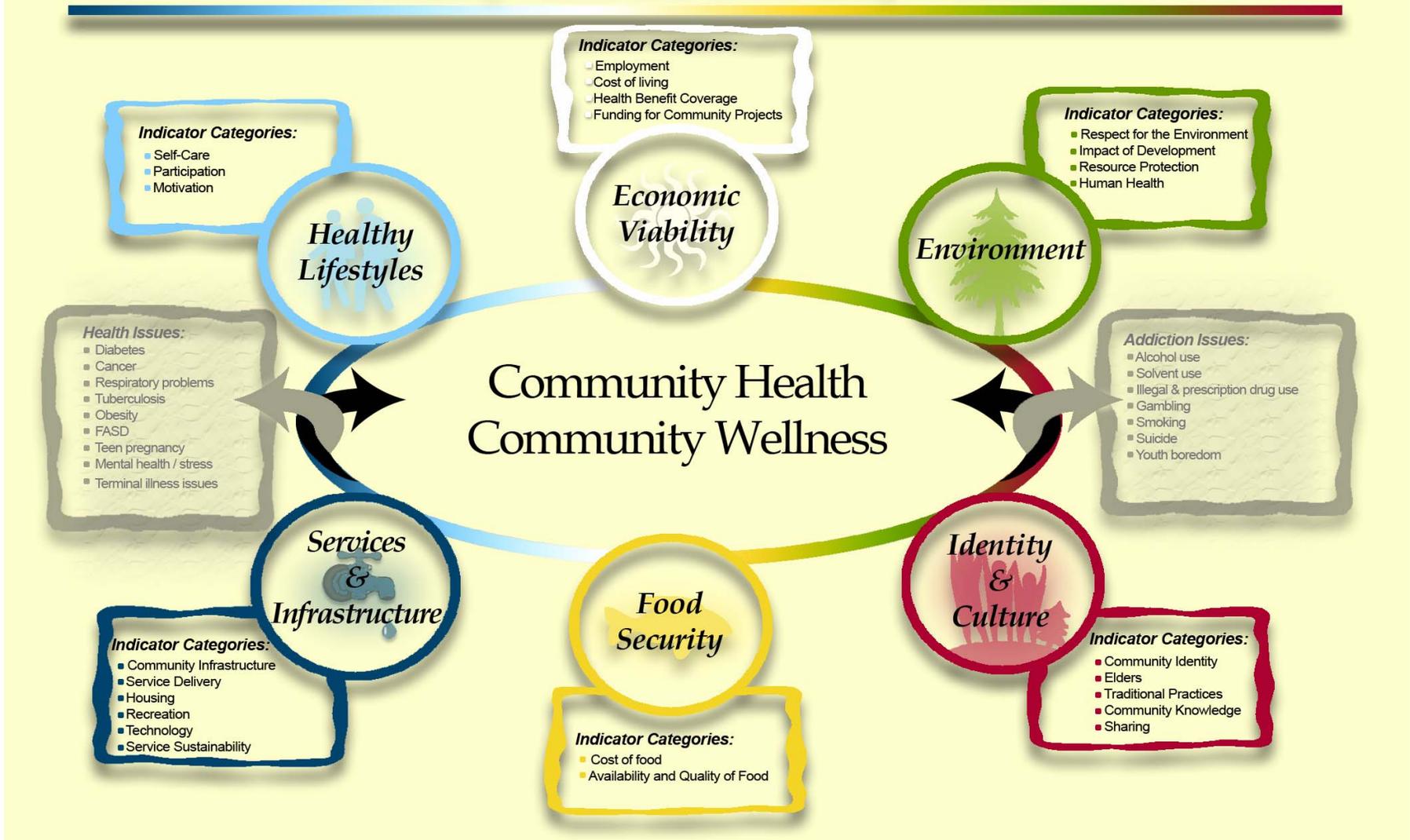
Any information (questions) that is listed as RHS (Regional Health Survey) has already been gathered for some communities and can only be accessed by that community. General survey questions are offered as examples for community developed surveys.

The Statistics Canada information is also readily available and easily found on their website. The data link will connect to the most up to date information that can be found. The direct data map to the questionnaires for this information is included here:

Find source at: <http://www.statscan.ca> >>(English/French) >> Definitions, Data Sources and Methods >> under the heading Questionnaires; Alphabetical list >> English or French Questionnaire of Aboriginal Peoples Survey – 2001

# Community Health Indicators Framework

## Key Domains & Indicator Categories: Community Health and Community Wellness



# Economic Viability

A state of community self-sufficiency, where there are businesses and economic partnerships to promote a local economy; jobs available to sustain personal and family needs; food, housing and medical services that are affordable; and a sense of optimism when community members consider future developments.

## Indicators:

### Employment

#### Local Availability

- 1 – unemployment rate
- 2 – jobs in the community
- 3 – people working outside community

#### Strategic Training

- 4 – training for potential jobs

#### Disincentives to Work

- Indicator #1
- 5 – cost of working vs social assistance

#### Local Business

- 6 – local businesses
- 7 – employment in local business

### Cost of Living

#### Cost of Food

- no indicators proposed

#### Cost of Healthy Food

- no indicators proposed

#### Food Subsidies

- 8 – food programs & usage

#### 9 – incentive to carry healthy foods

#### Transportation Costs

- 10 – cost of fuel
- 11 – distance to services
- 12 – cost of airline travel

#### Cost of Housing

- 13 – % of income spent on housing
- 14 – housing waitlists
- 15 – low income housing availability

#### Utility Costs

- 16 – cost of utility hook-up/reconnects

#### Competitive Retailing

- 17 – level of retail competition

#### Social Assistance Rates

- 18 – costs met by social assistance

#### Single Parent Families

- 19 – single parent families

### Health Benefit Coverage

#### Prescription Drugs

- 20 – drug costs paid out-of-pocket
- 21 – unfilled prescriptions

#### Medical Transportation

- 22 – medical transportation coverage
- 23 – treatment not followed due to cost

#### Companion & Translation Services

- 24 – Elders & youth travelling alone

... continued on next page

## Funding for Community Programs

### Sufficient Funding

no indicators proposed

### Stable Funding

no indicators proposed

### Infrastructure

no indicators proposed

### Staffing

25 – vacant staff positions

26 – staff training levels

27 – length of time in position

28 – community satisfaction with staff

### Promotion

29 – program participation rates

30 – program awareness levels

# Economic Viability

Economic Viability >> Employment >> **Local Availability**

**Issues Identified:** *Having few jobs available in the community requires people to leave in order to obtain work, which impacts family members left behind, community morale and volunteerism. Local jobs contribute to community sustainability.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
1	<b>Unemployment rate</b>	Existing data found at: A) <a href="http://www.statscan.ca">http://www.statscan.ca</a> >> (English / French) >> Community Profiles >> 2001 Aboriginal Peoples Survey Community Profiles or 2001 Aboriginal Population Profile >> Choose a community  <i>See Glossary of Unemployment Terms used by Statistics Canada (next page)</i>
2	<b># of jobs in the community</b>	See Indicator 1  Local survey required
3	<b>% of community members working outside the community</b>	Local survey required

**Data Sources:**

A) Statistics Canada: 2001 Community Profiles. Find source at: <http://www12.statcan.ca/english/profil01/PlaceSearchForm1.cfm>

## ***Glossary of Unemployment Terms used by Statistics Canada***

### **Participation Rate**

Refers to the labour force in the week (Sunday to Saturday) prior to Census Day (May 15, 2001), expressed as a percentage of the population 15 years of age and over.

### **Employment Rate**

Refers to the number of persons employed in the week (Sunday to Saturday) prior to Census Day (May 15, 2001), expressed as ***a percentage of the total population*** 15 years of age and over.

*Note:* The “% of adults not working for pay or in self-employment” is expressed as a percentage of the total population.

### **Unemployment Rate**

Refers to the unemployed expressed as ***a percentage of the labour force*** in the week (Sunday to Saturday) prior to Census Day (May 15, 2001).

$$\text{Unemployment rate} = \frac{\text{Unemployed}}{\text{Labour Force}} \times 100$$

### **When last worked for pay or in self-employment**

Refers to the year or period in which persons last worked for pay or in self-employment (even if only for a few days). It includes those who worked without pay in a family farm, business or professional practice. It does not include unpaid housework, unpaid childcare, unpaid care to seniors or volunteer work. It is used to identify persons with recent paid work experience.

### **Unemployed (in reference week)**

Persons who, during the week (Sunday to Saturday) prior to census day (May 15, 2001) were without paid work or without self-employment work and were available for work and either:

- Had actively looked for paid work in the past four weeks, or
- Were on temporary lay-off and expected to return to their job, or
- Had definite arrangements to start a new job in four weeks or less.

The unemployed category consists primarily of those persons who, during the week prior to enumeration (count; to ascertain a number), were without paid work, were unavailable for work, and had actively looked for paid work in the past four weeks.

# Economic Viability

Economic Viability >> Employment >> **Strategic Training**

**Issues Identified:** *When industry is developed in the region, local people are often not qualified for the available jobs. A need exists for targeted training in advance of industry start-up so that when industry is set up and jobs are available, local people are trained and qualified.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
4	# training programs directly related to available job opportunities	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Economic Viability

Economic Viability >> Employment >> **Disincentives to Work**

**Issues Identified:** *Employment can negatively impact living costs by the loss of access to low income housing, subsidized utility rates and medical cost coverage. As a result it can be more economically viable to remain on social assistance.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
	<p style="text-align: center;"><b>Unemployment rate</b></p>	<p style="text-align: center;">See Indicator 1</p>
<p style="text-align: center;"><b>5</b></p>	<p style="text-align: center;"><b>Cost analysis on benefits of working vs. social assistance</b></p>	<p style="text-align: center;">Local survey required</p>

**Data Sources:**

No indicator/survey source at this time

# Economic Viability

Economic Viability >> Employment >> **Local Business**

**Issues Identified:** *Local businesses contribute to a tax base (in provincial communities), provide employment and increased infrastructure, and improve community morale.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
6	# of local businesses in the community	Local survey required
7	# of community members employed in local businesses	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Economic Viability

Economic Viability >> Cost of Living >> **Cost of Food**

**Issues Identified:** *Cost of food in all categories in northern communities is high, especially in relation to income levels.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
	None proposed	<p>Local survey required – suggested measures:</p> <p>A) Healthy Food Costing Assessment (Community Vitality Monitoring Partnership Process project). Involves detailed calculations.</p> <p>B) Refer to the DIAND Alternative Northern Food Baskets publication. Calculating the cost of a northern food basket involves detailed calculations.</p> <p>Existing data found at:</p> <p>C) Existing data for costs of a weekly northern food basket dated 1991-1995 for the communities of Regina, Prince Albert, La Ronge, Black Lake and Stony Rapids. Find source and extensive data on Food Mail at: <a href="http://www.ainc-inac.gc.ca">http://www.ainc-inac.gc.ca</a> &gt;&gt; Programs and Services &gt;&gt; Northern Affairs Program &gt;&gt; Food Mail Program &gt;&gt; Northern Food Basket &gt;&gt; Saskatchewan</p>

**Data Sources:**

**A)** Community Vitality in Northern Saskatchewan. Third Annual Report of the Community Vitality Monitoring Partnership Process 2001. Find reference source at: <http://www.northern.gov.sk.ca>

**B)** Lawn, Judith and Hill, Frederick. 1998. Alternative Northern Food Baskets. Ottawa: Minister of Indian Affairs and Northern Development

**C)** Indian and Northern Affairs Canada. (2004). Northern Food Basket; Saskatchewan. Find source at: [http://www.ainc-inac.gc.ca/ps/nap/air/Fruijui/PDF/nfbsask\\_e.pdf](http://www.ainc-inac.gc.ca/ps/nap/air/Fruijui/PDF/nfbsask_e.pdf)

# Economic Viability

Economic Viability >> Cost of Living >> **Cost of Healthy Food**

**Issues Identified:** *Cost of healthy foods (typically fresh & perishable) is high in relation to other foods available and income levels, resulting in low consumption.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
	None proposed	<p>Local survey required – suggested questions and measures:</p> <p>A) Healthy Food Costing Assessment: Healthy Food Costing Assessment (Community Vitality Monitoring Partnership Process project). Involves detailed calculations.</p> <p>B) Health Canada: Alternative Northern Food Baskets Refer to Health Canada and the Alternative Northern Food Baskets publication (listed in references). Note: this is quite an involved calculation/ process.</p> <p>C) Food Quality in Labrador survey: - What is keeping you from buying more fresh fruit and vegetables? (List includes the option “they cost too much”) - Since this time last year, how has the price of fresh fruit and vegetable in your community changed?</p> <p>D) Nutrition and Food Security in Kugaaruk survey: - If you cannot get country food, can you tell me why? (List of answers includes “Gas too expensive” and “Repairs too expensive” - Some families might say “We couldn’t afford to eat healthy meals”. In the last 12 months did this happen often, sometimes, or never for your household? - Some families might say, “We could only feed our children less expensive foods because we were running out of money to buy food”. In the past 12 months did this happen often, sometimes, or never for your household?</p>

**Data Sources:**

A) Community Vitality in Northern Saskatchewan. Third Annual Report of the Community Vitality Monitoring Partnership Process 2001. Find reference source at: <http://www.northern.gov.sk.ca>

B) Lawn, Judith and Hill, Frederick. 1998. Alternative Northern Food Baskets. Ottawa: Minister of Indian Affairs and Northern Development

**C) Food Quality in Six Isolated Communities in Labrador – Questions 7/8**  
Find Source at: [http://www.ainc-inac.gc.ca/ps/nap/air/survfoo2001\\_e.PDF](http://www.ainc-inac.gc.ca/ps/nap/air/survfoo2001_e.PDF)

**D) Nutrition and Food Security in Kugaaruk, Nunavut. Baseline Survey for the Food Mail Pilot Project – Questions 403/602/603**  
Find Source at : [http://www.ainc-inac.gc.ca/ps/nap/air/rep2003/KugaRep03\\_e.pdf](http://www.ainc-inac.gc.ca/ps/nap/air/rep2003/KugaRep03_e.pdf)

# Economic Viability

Economic Viability >> Cost of Living >> **Food Subsidies**

**Issues Identified:** *There is a lack of food subsidy programs – the existing Food Mail program is not widely known or understood and is not directly accessible by community members. Incentives do not exist to encourage stores to carry healthy food products.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
8	# and use of food programs	Local survey required – suggested questions: A) Food Quality in Labrador study (retailer survey): If the quality of fresh fruit and vegetables improved in your store, do you think you would sell more of these foods? B) Nutrition and Food Security in Kugaaruk survey: Where do you usually buy most of your food? From the Coop, from Yellowknife by Food Mail, or from the south by air cargo?
9	Incentives for stores to carry healthy food items	Local survey required – suggested questions: A) Food Quality in Labrador study (retailer survey): - If the quality of fresh fruit and vegetables improved in your store, do you think you would sell more of these foods? - If the quality of fresh food improved, would you: Increase prices because customers would be willing to pay more? Lower prices, because you would have less spoilage? Continue to charge the same price?

**Data Sources:**

**A)** Food Quality in Six Isolated Communities in Labrador – Questions 7/8  
 Find Source at: [http://www.ainc-inac.gc.ca/ps/nap/air/survfoo2001\\_e.PDF](http://www.ainc-inac.gc.ca/ps/nap/air/survfoo2001_e.PDF)

**B)** Nutrition and Food Security in Kugaaruk, Nunavut. Baseline Survey for the Food Mail Pilot Project – Question 500  
 Find Source: [http://www.ainc-inac.gc.ca/ps/nap/air/rep2003/KugaRep03\\_e.pdf](http://www.ainc-inac.gc.ca/ps/nap/air/rep2003/KugaRep03_e.pdf)

# Economic Viability

Economic Viability >> Cost of Living >> **Transportation Costs**

**Issues Identified:** *Residents in remote communities pay higher costs for fuel and travel longer distances to access some services. Residents in communities not accessible by road must pay the cost of airfare to travel outside the community.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
10	Cost of fuel	Local survey required
11	Distance to services	Local survey required
12	Cost of airline travel to PA, Saskatoon	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Economic Viability

Economic Viability >> Cost of Living >> **Cost of Housing**

**Issues Identified:** *An overall scarcity of housing units contributes to higher rents and a further lack of low-income housing units contributes to overcrowding as those with low incomes move in with other family members. Frequent moves in search of better housing increases costs (i.e. re-hookup of utilities).*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
13	% of income spent on housing	Local survey required
14	Housing waiting lists	Local survey required
15	# of low income housing units	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Economic Viability

Economic Viability >> Cost of Living >> **Utility Costs**

**Issues Identified:** *Utility costs can vary depending on whether a person is on social assistance or not. The cost of utilities is impacted by the cost of utility re-hook-ups.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
16	Dollar amount of utility hook-ups and reconnects	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Economic Viability

Economic Viability >> Cost of Living >> **Competitive Retailing**

**Issues Identified:** *Food and fuel costs were reduced in communities where there was competition between retailers.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
17	# of retailers per commodity (i.e. fresh food, gas)	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Economic Viability

Economic Viability >> Cost of Living >> **Social Assistance Rates**

**Issues Identified:** *Social assistance rates do not adequately provide for the cost of living in northern Saskatchewan.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
18	% of cost of living met by social assistance rates	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Economic Viability

Economic Viability >> Cost of Living >> **Single Parent Families**

**Issues Identified:** *Many families are headed by single parents who experience reduced economic power (loss of spousal economies of scale) and increased costs (child care and other supports.)*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
19	# of single parent families	Existing data found at: <a href="http://www.statscan.ca">http://www.statscan.ca</a> >> (English / French) >> Community Profiles >> 2001 Aboriginal Peoples Survey Community Profiles or 2001 Aboriginal Population Profile >> Choose a community

**Data Sources:**

- A) Statistics Canada: 2001 Community Profiles. Find source at: <http://www12.statcan.ca/english/profil01/PlaceSearchForm1.cfm>

# Economic Viability

Economic Viability >> Health Benefit Coverage >> **Prescription Drugs**

**Issues Identified:** *The cost of prescription drugs is not always covered, depending on factors such as status and whether an individual is on social assistance. A recent policy requiring Treaty people to sign a confidentiality waiver or pay for health benefits up front has impacted whether people fill their prescriptions or not.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
20	% of drug costs paid “out of pocket” vs. by health programs	Local survey required
21	# of prescriptions issued to a patient but not filled	Local survey required – suggested questions: A) RHS (Adult survey):  - During the past 12 months, have you experienced any of the following barriers to receiving healthcare? (List includes: Not covered by Non-Insured Health benefits [e.g. service, medication, equipment]; Prior approval for services under Non-Insure Health Benefits was denied; Could not afford direct cost of care/service; Could not afford direct costs; Could not afford childcare costs). - <i>Community level data for RHS survey exists: must be accessed by community.</i>

**Data Sources:**

A) RHS: First Nations and Inuit Regional Longitudinal Health Survey (Adult survey) – Question 54. Find Source at: [http://www.naho.ca/firstnations/english/pdf/key\\_docs\\_adult.pdf](http://www.naho.ca/firstnations/english/pdf/key_docs_adult.pdf)

# Economic Viability

Economic Viability >> Health Benefit Coverage >> **Medical Transportation**

**Issues Identified:** *Coverage of costs for travel away from the community for medical treatment often do not cover the actual costs. e.g., accommodation is not always provided after hospital discharge; travel coverage is to the closest major centre from the community, not the city where the doctor or specialist is located. The abuse of medical transportation coverage results in a rigid application of benefits.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
22	% of actual costs covered by medical transportation funding	Local survey required – suggested questions: A) RHS (Adult survey): - During the past 12 months, have you experienced any of the following barriers to receiving healthcare? (List includes: Not covered by Non-Insured Health benefits [e.g. service, medication, equipment]; Prior approval for services under Non-Insure Health Benefits was denied; Could not afford direct cost of care/service; Could not afford direct costs; Could not afford childcare costs). - <i>Community level data for RHS survey exists: must be accessed by community.</i>
23	# of patients who do not follow recommended treatment due to cost	Local survey required – suggested questions: A) RHS (Adult survey): - During the past 12 months, have you experienced any of the following barriers to receiving healthcare? (List includes: Not covered by Non-Insured Health benefits [e.g. service, medication, equipment]; Prior approval for services under Non-Insure Health Benefits was denied; Could not afford direct cost of care/service; Could not afford direct costs; Could not afford childcare costs). - <i>Community level data for RHS survey exists: must be accessed by community.</i>

**Data Sources:**

A) RHS: First Nations and Inuit Regional Longitudinal Health Survey (Adult survey) – Question 54  
Find Source: [http://www.naho.ca/firstnations/english/pdf/key\\_docs\\_adult.pdf](http://www.naho.ca/firstnations/english/pdf/key_docs_adult.pdf)

# Economic Viability

Economic Viability >> Health Benefit Coverage >> **Companion & Translation Services for Elders and Youth**

**Issues Identified:** *Transportation costs are usually provided only for the person seeking treatment and as a result, very ill Elders and youth often have to travel alone. Elders do not have someone who can translate for them, especially needed to understand complex medical terminology.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
24	# of Elders & youth (under 16) travelling alone for medical care	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Economic Viability

Economic Viability >> Funding for Community Programs >> **Sufficient Funding**

**Issues Identified:** *Programs are chronically under-funded in some or all areas of operation. In order to be effective and produce desired outcomes, programs require sufficient funding (budget) to carry out identified activities.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
	None proposed	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Economic Viability

Economic Viability >> Funding for Community Programs >> **Stable Funding**

**Issues Identified:** *Programs require stable, long-term funding to allow for planning and evaluation, and to develop community commitment and support.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
	None proposed	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Economic Viability

Economic Viability >> Funding for Community Programs >> **Infrastructure**

**Issues Identified:** *Programs require suitable infrastructure to carry out identified activities (buildings, equipment, supplies).*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
	None proposed	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Economic Viability

Economic Viability >> Funding for Community Programs >> **Staffing**

**Issues Identified:** *Programs often do not have sufficient funds to attract and hire trained staff; short-term funding can result in a lack of staff commitment.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
25	% of required positions vacant	Local survey required
26	% of staff with formal training	Existing data found at: A) <a href="http://www.statscan.ca">http://www.statscan.ca</a> >> (English / French) >> Community Profiles >> 2001 Aboriginal Peoples Survey Community Profiles or 2001 Aboriginal Population Profile >> Choose a community
27	Trained staff - length of time in position	Local survey required
28	Community satisfaction with staff	Local survey required

**Data Sources:**

A) Statistics Canada: 2001 Community Profiles. Find source at: <http://www12.statcan.ca/english/profil01/PlaceSearchForm1.cfm>

# Economic Viability

Economic Viability >> Funding for Community Programs >> **Promotion**

**Issues Identified:** *In order for community members to support and participate in programs, an awareness and connectedness must be developed.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
29	Program participation rates	Local survey required
30	Program awareness levels	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Tool Sheet – Economic Viability

Economic Viability >> Employment >> **Strategic Training**

**Issues Identified:** When industry is developed in the region, local people are often not qualified for the available jobs. A need exists for targeted training in advance of industry start-up so that when industry is set up and jobs are available, local people are trained and qualified.

**Proposed Indicator:** **# 4** – of training programs directly related to job opportunities

**Suggested Measure:** Compare the number of specific industry job opportunities available to the number of local training spaces available related to the positions.

**Information Source:** Local survey

**How to use this measure:**

- Step 1)** Identify the specific job opportunity that will be available in the community or region.
- Step 2)** Identify training programs that directly relate to the type of job opportunity identified.
- Step 3)** Identify the # (number) of spaces available in those training programs.
- Step 4)** Use the ‘Indicator Calculation Tool’ formula to calculate the measure.

Indicator Calculation Tool	Calculation Example
$\frac{(\ ) \text{ training program X } (\ ) \text{ spaces}}{(\ ) \text{ specific positions}}$ $\frac{(\ )}{(\ )}$ $\text{X } 100$ $= \% \text{ participating}$	$\frac{(1) \text{ driller training program X } (5) \text{ spaces}}{(10) \text{ drilling positions available}}$ $\frac{5}{10}$ $= .50 \text{ X } 100$ $= 50\%$
<p>X = multiplied by      ( ) = Insert number here      _____ = divided by</p>	

**What does this information mean?**

Of the 10 drilling positions available, only 50% of the necessary training seats are available to provide local training to community members who would then be qualified for the positions. This information could be used to support requests to colleges to deliver training programs, and to funding agencies to provide financial support for these training spaces.

# Environment

Based on a respect for and commitment to the environment, this domain refers to the knowledge and resources necessary to manage the impact of development, both within and outside the community, and to ensure the environment is protected for future generations.

## Indicators:

### Respect for the Environment

#### Valuing Natural Resources

no indicators proposed

#### Commitment

1 – community clean-ups

### Impact of Development

#### Pollution

2 – air quality

3 – water quality

4 – levels of pollutants

#### Environmental Clean Up

5 – clean up agreements in place

#### Community Sustainability

6 – decrease in fish/wildlife populations

Indicators #2, #3

### Jurisdiction

no indicators proposed

### Resource Protection

#### Monitoring

7 – monitoring programs in place

#### Enforcement

8 – conservation officers per sq. kms.

#### Jurisdiction

9 – funds available for EHO monitoring

### Expertise

10 – funding from SERM

11 – EHO to interpret reports

### Human Health

#### Environmental

12 – # forest fires near community

13 – health effects of fire smoke

#### Structural

14 – accidents in home

# Environment

Environment >> Respect for the Environment >> **Valuing Natural Resources**

**Issues Identified:** *An appreciation for the beauty and resources that the land, water, fish and animals provide to current and future generations.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
	None proposed	<i>Local survey required</i>

**Data Sources:**

No indicator/survey source at this time

# Environment

Environment >> Respect for the Environment >> **Commitment**

**Issues Identified:** *Communities have a commitment to respect and protect the environment.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
1	Community clean-ups	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Environment

Environment >> Impact of Development >> **Pollution**

**Issues Identified:** *Industry (mines), population increase (residents and tourists) and lack of proper waste management systems at the community level are sources of land, air and water pollution.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
2	<b>Air quality</b>	Existing data found at: A) <a href="http://www.cri.ca">http://www.cri.ca</a> >> Our communities >> Scroll down: Choose your community (if available - Black Lake, Camsell Portage, Fond du Lac, Stony Rapids, Uranium City, Wollaston Lake)
3	<b>Water quality (safe to drink the lake water)</b>	Existing data found at: A) <a href="http://www.cri.ca">http://www.cri.ca</a> >> Our communities >> Scroll down: Choose your community (if available - Black Lake, Camsell Portage, Fond du Lac, Stony Rapids, Uranium City, Wollaston Lake) B) Uranium Mining Cumulative Effects Monitoring Program 2002 Annual Report – Table 8 – No current online source
4	<b>Levels of pollutants (uranium)</b>	Existing data found at: C) <a href="http://www.se.gov.sk.ca">http://www.se.gov.sk.ca</a> >> environment >> environmental protection >> land >> abandoned mines

x – suppressed to meet the confidentiality requirements of the Statistics Act

## Data Sources:

**A)** Athabasca Working Group Environmental Monitoring Program 2003  
Find source at: <http://www.cri.ca/communities/index.html>

**B)** Canada North Environmental Services & Zajdlik & Associates. (May, 2003). Uranium mining cumulative effects monitoring program 2002 annual report. Saskatoon: Saskatchewan Environment; La Ronge, Saskatchewan (Project no.1038)

**C)** An Assessment of Abandoned Mines in Northern Saskatchewan (Year Two) May 2002  
Find source at: <http://www.se.gov.sk.ca/environment/protection/land/R3278%20report%20no%202.pdf>

# Environment

Environment >> Impact of Development >> **Environmental Clean Up**

**Issues Identified:** *Determining who is responsible for the cleanup of abandoned industrial sites (contaminated soil, materials & equipment) and spills is challenging because of the many jurisdictions involved including local bands and municipalities, provincial and federal governments and industry.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
5	Clean-up agreements in place	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Environment

Environment >> Impact of Development >> **Effects of Community Sustainability**

**Issues Identified:** *Changes in landscape, wildlife habitat, air and water quality can affect the sustainability of communities at the most basic level – a livable environment.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
6	Decrease in fish and wildlife populations	Existing data found at: A) <a href="http://www.se.gov.sk.ca">http://www.se.gov.sk.ca</a> >> Fish & Hunt >> Status and Management of Wildlife in Saskatchewan, 1999-2001 (PDF)
	Water quality	See Indicator 3
	Air quality	See indicator 2

x – suppressed to meet the confidentiality requirements of the Statistics Act

**Data Sources:**

A) Status and Management of Wildlife in Saskatchewan, 1999-2001  
Find source at: <http://www.se.gov.sk.ca/fishwild/SWM99-01.pdf>

# Environment

Environment >> Impact of Development >> **Jurisdiction**

**Issues Identified:** *In addition to developmental impacts within their jurisdiction, communities sustain the developmental impacts from decisions made in other jurisdictions over which they have no control.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
	None proposed	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Environment

Environment >> Resource Protection >> **Monitoring**

**Issues Identified:** *Monitoring of air and water quality, wildlife habitat, and waste management is required to protect the environment.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
7	Monitoring programs in place	<p>Existing data found at:</p> <p>A) Uranium Mining Cumulative Effects Monitoring Program 2002 Annual Report – Table 8 – No current online source</p> <p>B) Athabasca Working Group Environmental Monitoring Program 2002: <i>Pollution levels for local water; wildlife; air; plants</i> - <a href="http://www.cri.ca">http://www.cri.ca</a> &gt;&gt; <i>Our communities</i> &gt;&gt; Scroll down: <i>Choose your community (if available - Black Lake, Camsell Portage, Fond du Lac, Stony Rapids, Uranium City, Wollaston Lake</i></p> <p>C) Status and Management of Wildlife in Saskatchewan 1999-2001: Provincial wildlife counts - <a href="http://www.se.gov.sk.ca">http://www.se.gov.sk.ca</a> &gt;&gt; <i>fish</i> &gt;&gt; <i>Status and Management of Wildlife in Saskatchewan, 1999 – 2001</i></p> <p>D) An Assessment of Abandoned Mines in Northern Saskatchewan – Safety ranking for mines sites on pages 5, 6, 7 – <a href="http://www.se.gov.sk.ca">http://www.se.gov.sk.ca</a> &gt;&gt; <i>environment</i> &gt;&gt; <i>environmental protection</i> &gt;&gt; <i>land</i> &gt;&gt; <i>abandoned mines</i></p>

**Data Sources:**

**A)** Canada North Environmental Services, Zajdlik & Associates. (May, 2003). Uranium Mining Cumulative Effects Monitoring Program 2002 Annual Report. Saskatoon: Saskatchewan Environment; La Ronge, Saskatchewan

**B)** Athabasca Working Group Environmental Monitoring Program 2003  
Find source at: <http://www.cri.ca/communities/index.html>

**C)** Status and Management of Wildlife in Saskatchewan, 1999-2001  
Find source at: <http://www.se.gov.sk.ca/fishwild/SWM99-01.pdf>

**D)** An Assessment of Abandoned Mines in Northern Saskatchewan (Year Three)  
Find source at: <http://www.se.gov.sk.ca/environment/protection/land/R3278%20report%20no%202.pdf>

# Environment

Environment >> Resource Protection >> **Enforcement**

**Issues Identified:** *An adequate number of conservation officers is needed to enforce environmental regulations in the region, especially with the increase in hunting and fishing camps.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
8	# of conservation officers (per square kms)	Existing data found at: A) <a href="http://www.se.gov.sk.ca">http://www.se.gov.sk.ca</a> >> Corporate >> Contacts and Office Locations >> Select Prince Albert for northern contacts

**Data Sources:**

A) Saskatchewan Environment contacts – contact information for provincial environment representatives  
Find source at: <http://www.se.gov.sk.ca/corporate/ContactList>

# Environment

Environment >> Resource Protection >> **Jurisdiction**

**Issues Identified:** *The lack of an integrated approach by various jurisdictions dealing with the same issue prevents needs from being met.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
9	<p><b>Funds available for an EHO to monitor area regardless of jurisdiction</b></p>	<p>Existing data found at:            A) <a href="http://www.se.gov.sk.ca">http://www.se.gov.sk.ca</a> &gt;&gt; corporate &gt;&gt; contacts and office locations &gt;&gt; Select Prince Albert for northern contacts</p>

**Data Sources:**

A) Saskatchewan Environment contacts – contact information for provincial environment representatives - Find source at: <http://www.se.gov.sk.ca/corporate/ContactList>

# Environment

Environment >> Resource Protection >> **Expertise**

**Issues Identified:** *There is a need for long-term land use planning and management of environmental impacts from industry; communities require access to expertise to help interpret the environmental reports they receive.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
10	Funding from SERM	Local survey required
11	<b>Availability of EHO to help community members interpret reports</b>	Existing data found at: A) <a href="http://www.se.gov.sk.ca">http://www.se.gov.sk.ca</a> >> corporate >> contacts and office locations >> Select Prince Albert for northern contacts

**Data Sources:**

A) Saskatchewan Environment contacts – contact information for provincial environment representatives  
Find source at: <http://www.se.gov.sk.ca/corporate/ContactList>

# Environment

Environment >> Human Health >> **Environmental**

**Issues Identified:** *Effects of forest fires on air quality.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
12	# of forest fires near the community	Existing data found at: A) <a href="http://www.se.gov.sk.ca">http://www.se.gov.sk.ca</a> >> Fire >> Current wildfire activity >> Fires to date
13	Health effects of forest fire smoke on community health	Local survey required

**Data Sources:**

A) Information regarding forest fires  
Find source at: <http://www.se.gov.sk.ca/fire/>

# Environment

Environment >> Human Health >> **Structural**

**Issues Identified:** *Effects of housing (and other structural) quality on human health, including accidents due to houses in disrepair and health hazards such as black mold.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
14	# of accidents in the home	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Tool Sheet – Environment

Environment >> Resource Protection >> **Enforcement**

**Issues Identified:** An adequate number of conservation officers is needed to enforce environmental regulations in the region, especially with the increase in hunting and fishing camps.

**Proposed Indicator:** **# 8** – number of conservation officers per square kilometers

**Suggested Measure:** Compare the number of conservation officers assigned within a specified geographic range to the number required.

**Information Source:** 1) SERM (Saskatchewan Environment and Resource Management) <http://www.se.gov.sk.ca> >> Corporate >> Contacts and Office Locations >> Select Prince Albert for northern contacts

2) Local survey

**How to use this measure:**

**Step 1)** Identify the # (number) of conservation officers required or desired within a specific geographic range (in kms).

**Step 2)** Identify the # of conservation officers (identified from the information source above) assigned to the specific geographic range

**Step 3)** Use the 'Indicator Calculation Tool' formula to calculate the measure.

Indicator Calculation Tool	Calculation Example
$\frac{(\ ) \text{ conservation officers assigned to area}}{(\ ) \text{ conservation officers required in area}}$ $\frac{(\ )}{(\ )}$ $\times 100$ <p>= % of needed officers</p>	$\frac{(2) \text{ conservation officers assigned to area}}{(6) \text{ conservation officers required in area}}$ $\frac{2}{6}$ $= .333 \times 100$ <p>= 33% of needed officers</p>
<p>X = multiplied by      ( ) = Insert number here      _____ = divided by</p>	

**What does this information mean?**

Only one-third of the required conservation officers are available for the specified geographic area to properly enforce environment regulations. This information could be used to support a request for additional conservation officers.

# Identity & Culture

An ability to convey community history, cultural and traditional practices and language, along with the nurturing of a holistic approach to life and intergenerational relationships. Activities that promote community culture and identity are acknowledged as key to developing positive self-esteem and positive self-image for community members.

## Indicators:

### Community Identity

#### Cultural Activities

- 1 – cultural activities & participation
- 2 – volunteering at cultural events

#### Spiritual Activities

- 3 – spiritual activities & participation
- 4 – visits by spiritual leaders

#### Community Events

- 5 – community events & participation
- 6 – transparency in use of event funds

#### Community Morale

- 7 – feeling safe in the community
- 8 – condition of buildings & grounds

9 – recognition of positive contributions

10 – distance from other communities

#### Communication

11 – community newsletter

### Elders

#### Involvement with Youth

- 12 – formal Elder / youth activities
- 13 – informal Elder / youth activities

#### Involvement in Community

- 14 – social gathering places for Elders
- 15 – community decision with Elder input

#### Remain in Community

16 – Elders leaving for end of life care

17 – support programs for Elders

### Traditional Practices

#### Spiritual

18 – visits to community by Medicine Man

#### Cultural

19 – traditional cultural activities

#### Language

- 20 – youth speaking traditional language
- 21 – teachers speak traditional language
- 22 – language used in assembly/council
- 23 – youth involved in language classes

### Healing & Restorative Justice

24 – healing circles & participation

### Maintaining Traditional Practices

25 – costs of Elder visits

26 – costs of traditional education

27 – local teachers in schools

28 – cultural awareness programs

### Traditional Ways

29 – traditional education programs

30 – people hunting and fishing

31 – access to hunting and fishing

32 – methods of hunting and fishing

33 – Elder/youth in traditional activities

... continued on next page

## Community Knowledge

### Cultural Knowledge (Elders)

Indicators #12, #13, #15

### Recognizing Multi-Cultural History

34 – cultural awareness events

### Knowledge of Community History

Indicators #27, #29

### Promotion of Community

35 – applying for and receiving grants

36 – approaching mines to invest

## Sharing

### Parenting

no indicators proposed

### Volunteerism

37 – volunteering at community events

38 – informal volunteering

### Resources

39 – game shared after hunts

# Identity & Culture

Identity & Culture >> Community Identity >> **Cultural Activities**

**Issues Identified:** *Activities that represent/celebrate cultural awareness and practices help provide an understanding of cultural values and support community identity.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
1	# and type of cultural activities and participation	Local survey required – suggested measures and existing data found at: A) CBM Adult/Youth Survey: Question 28/21-How many times have you volunteered for a community event (e.g. feast/helping Elder) in the last year?% of B) <a href="http://www.statscan.ca">http://www.statscan.ca</a> >> (English / French) >> Community Profiles >> 2001 Aboriginal Peoples Survey Community Profiles or 2001 Aboriginal Population Profile >> Choose a community
2	Level of volunteering at cultural events	Local survey required

**Data Sources:**

A) CBM: Community-Based Monitoring Project Adult/Youth Survey – Questions 28/21  
 Find Source at: [http://www.wkss.nt.ca/HTML/08\\_ProjectsReports/PDF/CBMFinal2002.pdf](http://www.wkss.nt.ca/HTML/08_ProjectsReports/PDF/CBMFinal2002.pdf)

B) Statistics Canada: 2001 Community Profiles. Find source at: <http://www12.statcan.ca/english/profil01/PlaceSearchForm1.cfm>

# Identity & Culture

Identity & Culture >> Community Identity >> **Spiritual Activities**

**Issues Identified:** *Spiritual activities that represent the beliefs of community members help to develop identity and common values and provide support for community members.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
3	<b># and type of spiritual activities and participation levels</b>	Local survey required
4	<b># of visits by spiritual leader to community</b>	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Identity & Culture

Identity & Culture >> Community Identity >> **Community Events**

**Issues Identified:** *Events within the community that bring people together help to develop social relationships and supports as well as community knowledge, identity and morale. It is important that there is accountability for funds raised at events.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
5	<b># and type of community events and participation levels</b>	Local survey required
6	<b>Transparency in use of funds raised at events</b>	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Identity & Culture

Identity & Culture >> Community Identity >> **Community Morale**

**Issues Identified:** *Having a sense of belonging, pride and well-being within a community is an important factor in promoting positive activities and encouraging participation in community events. A sense of belonging is sometimes heightened by the remoteness of a community. A feeling of security is also very important for community morale.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
7	Indicator of 'feeling safe in the community'	Local survey required
8	Condition of buildings and grounds	Local survey required
9	Recognition of positive contributions (e.g. citizen of the month)	Local survey required

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
10	Distance from other communities	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Identity & Culture

Identity & Culture >> Community Identity >> **Communication**

**Issues Identified:** *The community's ability to share information with all members is important to generate awareness of community issues and foster community activities and involvement.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
11	<b>Community newsletter (distribution method and #, # of copies read)</b>	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Identity & Culture

Identity & Culture >> Elders >> **Involvement with Youth**

**Issues Identified:** *An emphasis is placed on building and maintaining relationships between Elders and youth to allow for the transmission of traditional culture, spirituality and language, and to maintain inter-generational ties.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
12	<b># of formal Elder/youth activities and participation levels</b>	<b>Local survey required – suggested questions:</b> <b>A) CBM Adult survey:</b> Q27-How many times have you taken youth caribou hunting in the last year?
13	<b># of informal (e.g. fishing and hunting) Elder/youth activities</b>	Local survey required

**Data Sources:**

A) CBM: Community-Based Monitoring Project (page 26: adult survey in PDF; page 37: youth survey in PDF) – Question 27  
[http://www.wkss.nt.ca/HTML/08\\_ProjectsReports/PDF/CBMFinal2002.pdf](http://www.wkss.nt.ca/HTML/08_ProjectsReports/PDF/CBMFinal2002.pdf)

# Identity & Culture

Identity & Culture >> Elders >> **Involvement in Community**

**Issues Identified:** *The opportunity to have a social network and remain involved in the community allows Elders to pass on valuable knowledge to the community and improve community well-being.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
14	<b>Social gathering places for Elders in community (e.g. coffee house)</b>	Local survey required
15	<b># of community decisions with Elders' input</b>	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Identity & Culture

## Identity & Culture >> Elders >> **Remain in Community**

**Issues Identified:** *Supports in the community that recognize the importance of caring for Elders allow for Elders to remain in the community and experience a good quality of life, despite health or other concerns. A great sense of loss is experienced when Elders pass away outside the community.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
16	<b># of Elders who must leave community for end of life care</b>	Local survey required
17	<b># of support programs in the community for Elders (e.g. home care, palliative care, specialized senior housing)</b>	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Identity & Culture

Identity & Culture >> Traditional Practices >> **Spiritual**

**Issues Identified:** *Practicing and promoting traditional methods of spirituality supports traditional values and ways of life, offering a common vision and raising individual identity with the community and the environment.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
18	# of visits to community by Medicine man	<i>Local survey required</i>

**Data Sources:**

No indicator/survey source at this time

# Identity & Culture

Identity & Culture >> Traditional Practices >> **Cultural**

**Issues Identified:** *Practicing and promoting traditional cultural practices is important to maintaining traditional values, beliefs and lifestyle. Cultural activities develop community identity and morale among members.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
19	<b># of traditional cultural activities &amp; participation (celebrations, rituals, culture camps)</b>	Existing data found at: A) <a href="http://www.statscan.ca">http://www.statscan.ca</a> >> (English / French) >> Community Profiles >> 2001 Aboriginal Peoples Survey Community Profiles or 2001 Aboriginal Population Profile >> Choose a community

**Data Sources:**

A) Statistics Canada: 2001 Community Profiles. Find source at: <http://www12.statcan.ca/english/profil01/PlaceSearchForm1.cfm>

# Identity & Culture

Identity & Culture >> Traditional Practices >> **Language**

**Issues Identified:** *Language plays a central role in preserving First Nations' identity, philosophy/worldview and traditions; it is important to support traditional language use within the community (especially the youth).*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
20	<b>% of youth who speak traditional language</b>	<p>Local survey required – suggested questions and existing data found at:</p> <p>A) RHS (Adolescent survey): Question 12-What languages do you speak? (List of Aboriginal languages to check off) - <i>Community level data for RHS survey exists: must be accessed by community.</i></p> <p>B) <a href="http://www.statscan.ca">http://www.statscan.ca</a> &gt;&gt; (English / French) &gt;&gt; Community Profiles &gt;&gt; 2001 Aboriginal Peoples Survey Community Profiles or 2001 Aboriginal Population Profile &gt;&gt; Choose a community</p>
21	<b># of teachers who speak traditional language</b>	<p>Existing data found at:</p> <p>B) <a href="http://www.statscan.ca">http://www.statscan.ca</a> &gt;&gt; (English / French) &gt;&gt; Community Profiles &gt;&gt; 2001 Aboriginal Peoples Survey Community Profiles or 2001 Aboriginal Population Profile &gt;&gt; Choose a community</p>
22	<b>Language used in assembly/council meetings</b>	<p>Existing data found at:</p> <p>B) <a href="http://www.statscan.ca">http://www.statscan.ca</a> &gt;&gt; (English / French) &gt;&gt; Community Profiles &gt;&gt; 2001 Aboriginal Peoples Survey Community Profiles or 2001 Aboriginal Population Profile &gt;&gt; Choose a community</p>

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
23	# of youth involved in traditional language education	Existing data found at: B) <a href="http://www.statscan.ca">http://www.statscan.ca</a> >> (English / French) >> Community Profiles >> 2001 Aboriginal Peoples Survey Community Profiles or 2001 Aboriginal Population Profile >> Choose a community

**Data Sources:**

**A)** RHS: First Nations and Inuit Regional Longitudinal Health Survey (Adolescence survey) - Question 12

Find source at: [http://www.naho.ca/firstnations/english/pdf/key\\_docs\\_adolescent.pdf](http://www.naho.ca/firstnations/english/pdf/key_docs_adolescent.pdf)

**B)** Statistics Canada: 2001 Community Profiles. Find source at: <http://www12.statcan.ca/english/profil01/PlaceSearchForm1.cfm>

# Identity & Culture

Identity & Culture >> Traditional Practices >> **Healing & Restorative Justice**

**Issues Identified:** *Healing/restorative justice is a traditional practice that supports community responsibility and allows for retention of community members.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
24	# of healing circles/ participation levels	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Identity & Culture

Identity & Culture >> Traditional Practices >> **Maintaining Traditional Practices**

**Issues Identified:** *The costs of maintaining traditional culture can be a financial burden. Difficulties are experienced in hiring local teachers who can maintain language and culture among youth; promoting an understanding of traditional practices with others who come into the community is important in developing support for traditional ways.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
25	<b>Costs of Elder visits (transportation, honorariums)</b>	Local survey required
26	<b>Costs of traditional education programs</b>	Local survey required
27	<b>% of local teachers in schools</b>	Existing data found at: A) <a href="http://www.statscan.ca">http://www.statscan.ca</a> >> (English / French) >> Community Profiles >> 2001 Aboriginal Peoples Survey Community Profiles or 2001 Aboriginal Population Profile >> Choose a community

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
28	# of cultural awareness programs delivered to service providers	Local survey required

**Data Sources:**

A) Statistics Canada: 2001 Community Profiles. Find source at: <http://www12.statcan.ca/english/profil01/PlaceSearchForm1.cfm>

# Identity & Culture

Identity & Culture >> Traditional Practices >> **Traditional Ways**

**Issues Identified:** *Practicing traditional ways of life such as hunting and fishing is a way to preserve cultural practices and support self-sustainability.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
29	# of traditional education programs (skills, language)	<p>Local survey required – suggested questions and existing data found at:</p> <p>A) <a href="http://www.statscan.ca">http://www.statscan.ca</a> &gt;&gt; (English / French) &gt;&gt; Community Profiles &gt;&gt; 2001 Aboriginal Peoples Survey Community Profiles or 2001 Aboriginal Population Profile &gt;&gt; Choose a community</p> <p><b>B) CBM (Adult and Youth surveys):</b>            Q21-Did you go hunting for geese/ducks in the last year?            Q22-Did you go out to make dry-fish in the last year?            Q23-Did you go on the fall hunt to Artillery Lake this last fall?            Q26-How many caribou have you harvested in the last year?            Q27-How many times have you taken youth caribou hunting in the last year?</p> <p>C) EAGLE Health Survey:            Question 28-Does ____ do any fishing?            Local survey required for hunting and fishing rights, as per community            Q29- What does ____ do with the fish they catch? (List includes: Eat them; Share them; Give them away; Sell them; Throw them back; Other).</p> <p><b>D) RHS Adolescent survey:</b>            Question 14-Who helps you in understanding your culture? (List includes: My grandparents and Community Elders ...among other choices) - <i>Community level data for RHS survey exists: must be accessed by community.</i></p>

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
30	<b>% of people in community who hunt and fish</b>	Existing data found at: A) <a href="http://www.statscan.ca">http://www.statscan.ca</a> >> (English / French) >> Community Profiles >> 2001 Aboriginal Peoples Survey Community Profiles or 2001 Aboriginal Population Profile >> Choose a community
31	<b>Access to hunting and fishing</b>	Local survey required
32	<b>Methods of hunting, fishing and food preparation</b>	Local survey required
33	<b># of traditional activities involving Elders and youth</b>	Local survey required

**Data Sources:**

A) Statistics Canada: 2001 Community Profiles. Find source at: <http://www12.statcan.ca/english/profil01/PlaceSearchForm1.cfm>

B) CBM: Community-Based Monitoring Project (page 26: adult survey in PDF; page 37: youth survey in PDF) – Questions 21/22/23/26/27  
[http://www.wkss.nt.ca/HTML/08\\_ProjectsReports/PDF/CBMFinal2002.pdf](http://www.wkss.nt.ca/HTML/08_ProjectsReports/PDF/CBMFinal2002.pdf)

C) Eagle Project Health Survey:  
Chiefs on Ontario, Environment Department. 2001. Eagle Project Health Survey. – Question 28/29  
[http://www.chiefs-of-ontario.org/eagle/tool\\_11.pdf](http://www.chiefs-of-ontario.org/eagle/tool_11.pdf)

**D)** RHS: First Nations and Inuit Regional Longitudinal Health Survey – Question 14  
[http://www.naho.ca/firstnations/english/pdf/key\\_docs\\_adolescent.pdf](http://www.naho.ca/firstnations/english/pdf/key_docs_adolescent.pdf)

# Identity & Culture

Identity & Culture >> Community Knowledge >> **Cultural Knowledge (Elders)**

**Issues Identified:** *Understanding cultural knowledge is a way to develop an identity and shared vision within a community; it also allows for Elders to pass on knowledge and develop inter-generational ties.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
	<b># of formal Elder/youth activities and participation levels</b>	See Indicator 12
	<b># of informal (i.e. fishing and hunting) Elder/youth activities</b>	See Indicator 13
	<b># of community decisions with Elders' input</b>	See Indicator 15

**Data Sources:**

See for indicators 12, 13 & 15

# Identity & Culture

Identity & Culture >> Community Knowledge >> **Recognition of Multi-Cultural History**

**Issues Identified:** *Recognizing and celebrating the multi-cultural aspects of a community can help bring people together despite differences, and helps to educate community members about different cultures and ways of life.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
34	# of cultural awareness events and # of cultures explored (e.g. Mosaic Days)	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Identity & Culture

Identity & Culture >> Community Knowledge >> **Knowledge of Community History**

**Issues Identified:** *Understanding community history is important to inform community members about their community and background. The ability to know who you are and where you come from is important to developing a sense of belonging and identity.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
	<b># of traditional education programs</b>	See Indicator 29
	<b>% of local teachers in schools</b>	See Indicator 27

**Data Sources:**

See for indicators 27 & 29

# Identity & Culture

Identity & Culture >> Community Knowledge >> **Promotion of Community**

**Issues Identified:** *The ability for the community to promote itself to outside sources that can assist in achieving more cultural awareness and promotion of traditional practices. The promotion of community events within and outside the community is important to attract participation and help develop relationships.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
35	<p><b>Applying and receiving grants to support knowledge building programs</b></p>	<p>Local survey required</p>
36	<p><b>Approach mines to invest in community</b></p>	<p>Local survey required</p>

**Data Sources:**

No indicator/survey source at this time

# Identity & Culture

Identity & Culture >> Sharing >> **Parenting**

**Issues Identified:** *Shared parenting is a sense of responsibility to all youth in the community, it is an important traditional value that assists the community in being responsible for each other and looking out for one another's well-being.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
	None proposed	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Identity & Culture

Identity & Culture >> Sharing >> **Volunteerism**

**Issues Identified:** *Volunteers are important for a community to operate successful programs and lower the cost of maintaining their community. Volunteering shows a sense of responsibility and care for your community that develops from having a strong identity.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
37	# of volunteers for community events	<b>Local survey required – suggested questions:</b> <b>A) CBM Adult/Youth Survey:</b> Question 28/21-How many times have you volunteered for a community event (e.g. feast/helping elder) in the last year?
38	Level of informal volunteering (assisting Elders, helping others with building projects, etc.)	Local survey required

**Data Sources:**

**A) CBM:** Community-Based Monitoring Project (page 26: adult survey in PDF; page 37: youth survey in PDF) – Question 21/28  
[http://www.wkss.nt.ca/HTML/08\\_ProjectsReports/PDF/CBMFinal2002.pdf](http://www.wkss.nt.ca/HTML/08_ProjectsReports/PDF/CBMFinal2002.pdf)

# Identity & Culture

Identity & Culture >> Sharing >> **Resources**

**Issues Identified:** *Sharing resources such as food and labour is important to provide well-being to the entire community, especially when individuals are experiencing difficult living situations. Sharing also exemplifies the collective spirit of the community and the amount of compassion for fellow community members.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
39	Game shared after hunts	<p><b>Local survey required – suggested questions:</b></p> <p><b>A) EAGLE Health Survey:</b></p> <p>Q29- What does ____ do with the fish they catch? (List includes: Eat them; Share them; Give them away; Sell them; Throw them back; Other).</p>

**Data Sources:**

**A) Eagle Project Health Survey:** Chiefs of Ontario, Environment Department. 2001. EAGLE Project Health Survey. [http://www.chiefs-of-ontario.org/eagle/tool\\_11.pdf](http://www.chiefs-of-ontario.org/eagle/tool_11.pdf)

# Tool Sheet – Identity & Culture

Identity & Culture >> Traditional Practices >> **Language**

**Issues Identified:** Language plays a central role in preserving First Nations identity, philosophy/worldview and traditions; it is important to support traditional language use within the community (especially the youth).

**Proposed Indicator:** **# 20** – % of youth who speak traditional language

**Suggested Measure:** Compare the number of youth who speak their traditional language with the number who do not.

**Information Source:** Existing data and suggested questions that could be used in a local survey are provided below. Limitations to the existing data are noted below (see \*).

A) RHS (Adolescent survey): [http://www.naho.ca/firstnations/english/pdf/key\\_docs\\_adolescent.pdf](http://www.naho.ca/firstnations/english/pdf/key_docs_adolescent.pdf)

Question 12 - What languages do you speak? (A list of Aboriginal languages to check off is provided)

*Note: Community level data for RHS survey exists; must be accessed by community.*

The following related data also exists from the RHS (adolescent survey):

Question 9 – What language do you most often use in daily life?

Question 10 – How important is it to you to speak your First Nations/Inuit language?

Question 11 – What languages do you understand?

B) <http://www.statscan.ca> >> (English / French) >> Community Profiles >> 2001 Aboriginal Peoples Survey Community Profiles or 2001 Aboriginal Population Profile >> Child / Saskatchewan / Choose a community

% of children who can speak or understand an Aboriginal language	
<b>Importance of child speaking and understanding an Aboriginal language:</b>	
Very important or somewhat important (%)	
Not very important or not important (%)	
<b>% of children who understand an Aboriginal language:</b>	
Very well or relatively well	
With effort / A few words / Not well at all	
<b>% of children who can speak an Aboriginal language:</b>	
Very well or relatively well	
With effort / A few words / Not well at all	
<b>% of children who receive help learning an Aboriginal language from:</b>	
Grandparents	
Parents	
Aunts and uncles	
School teachers	
Other persons	

---

**How to use this measure:**

- Step 1)** Identify the number of youth in the community.
- Step 2)** Identify the number of youth who speak their traditional language, by using existing data (as in the table above) or by conducting a local survey. Suggested survey questions can be found in the Regional Health Survey (RHS) as well as the 2001 Aboriginal Peoples' Survey Community Profiles.
- Step 3)** Use the 'Indicator Calculation Tool' formula to calculate the measure.

Indicator Calculation Tool	Calculation Example
$\frac{(\ ) \text{ \# of youth who speak their traditional language}}{(\ ) \text{ \# of youth in the community}} \times 100$ <p>= % who speak traditional language</p>	$\frac{(225) \text{ youth who speak their traditional language}}{(300) \text{ youth in the community}} = .75 \times 100$ <p>= 75% speak traditional language</p>
<b>X</b> = multiplied by      ( ) = Insert number here      _____ = divided by	

**What does this information mean?**

Although this information indicates the number of youth who speak the language, more information would be needed to determine the frequency of use and fluency. Understanding the extent to which the traditional language is being passed on to youth could be used to determine the effectiveness of existing cultural and language programs and events, and to support proposals for traditional language education in the schools.

**\*Limitations of the Existing Data:**

As not all community members took part in the Regional Health Survey or the 2001 Aboriginal Peoples' Survey, the data may not accurately reflect the participation levels in a particular community, and should be used with caution.

# Food Security

Food security is defined as the ability to identify and access nutritious food that will contribute to a healthy lifestyle. Food security takes into account the cost of food, access to nutritious food, use of traditional foods, and the relationship of food to one's health.

---

## Indicators:

### Cost of Food

#### Cost of Food

no indicators proposed

#### Cost of Healthy Food

no indicators proposed

#### Food Subsidies

1 – availability and use of food programs

2 – incentives to carry healthy food

#### Competitive Retailing

3 – level of retailer competition

### Availability & Quality of Food

#### Competitive Retailing

4 – food delivery times

5 – delayed or lost shipments

6 – availability of fresh vs unhealthy food

7 – food received in poor/unfit condition

8 – compensation for unfit shipments

#### Traditional Foods

9 – levels of hunting and fishing

10 – traditional food availability

#### Nutrition Education

11 – nutrition education programs

12 – cooking classes

### Food Programs

13 – snack programs at schools/events

#### Collective Action

14 – bulk food ordering/purchasing

15 – Good Food Box program

16 – food programs

# Food Security

Food Security >> Cost of Food >> **Cost of Food**

**Issues Identified:** *Cost of food in all categories in northern communities is high, especially in relation to income levels.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
	None proposed	Local survey required – suggested measures found at: A) Refer to the DIAND Alternative Northern Food Baskets publication (listed in references). Calculating the cost of a northern food basket involves complex calculations. B) Healthy Food Costing Assessment - Healthy Food Costing Assessment (Community Vitality Monitoring Partnership Process project). Involves detailed calculations.

**Data Sources:**

**A)** Lawn, Judith and Hill, Frederick. 1998. Alternative Northern Food Baskets. Ottawa: Minister of Indian Affairs and Northern Development

**B)** Community Vitality in Northern Saskatchewan. Third Annual Report of the Community Vitality Monitoring Partnership Process 2001.  
 Find source at: [http://www.northern.gov.sk.ca/docs/publications/annualReport00\\_01.pdf](http://www.northern.gov.sk.ca/docs/publications/annualReport00_01.pdf)

# Food Security

Food Security >> Cost of Food >> **Cost of Healthy Food**

**Issues Identified:** *Cost of healthy foods (typically fresh & perishable) is high in relation to other foods available and income levels, resulting in low consumption.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
	None proposed	<p>Local Survey required – suggested questions and measures found at:</p> <p>A) Healthy Food Costing Assessment: Healthy Food Costing Assessment (Community Vitality Monitoring Partnership Process project). Involves detailed calculations.</p> <p>B) Health Canada: Alternative Northern Food Baskets - Refer to Health Canada and the Alternative Northern Food Baskets publication (listed in references). Note: this is quite an involved calculation/ process.</p> <p>C) Food Quality in Labrador survey:            - What is keeping you from buying more fresh fruit and vegetables? (List includes the option “they cost too much”)            - Since this time last year, how has the price of fresh fruit and vegetable in your community changed?</p> <p>D) Nutrition and Food Security in Kugaaruk survey:            - If you cannot get country food, can you tell me why? (List of answers includes “Gas too expensive” and “Repairs too expensive”            - Some families might say “We couldn’t afford to eat healthy meals”. In the last 12 months did this happen often, sometimes, or never for your household?            - Some families might say, “We could only feed our children less expensive foods because we were running out of money to buy food”. In the past 12 months did this happen often, sometimes, or never for your household?</p>

**Data Sources:**

A) Community Vitality in Northern Saskatchewan. Third Annual Report of the Community Vitality Monitoring Partnership Process 2001. Find source at: <http://www.northern.gov.sk.ca/NorthernMines/Publications/CommunityVitality/CVitalityAnnualReport01.pdf>

**B)** Lawn, Judith and Hill, Frederick. 1998. Alternative Northern Food Baskets. Ottawa: Minister of Indian Affairs and Northern Development

**C)** Food Quality in Six Isolated Communities in Labrador – Questions 7/8 (Retailer survey questions 6/7)

Find source at: [http://www.ainc-inac.gc.ca/ps/nap/air/survfoo2001\\_e.PDF](http://www.ainc-inac.gc.ca/ps/nap/air/survfoo2001_e.PDF)

**D)** Nutrition and Food Security in Kugaaruk, Nunavut – Questions 403/602/603

Find source at: [http://www.ainc-inac.gc.ca/ps/nap/air/rep2003/KugaRep03\\_e.pdf](http://www.ainc-inac.gc.ca/ps/nap/air/rep2003/KugaRep03_e.pdf)

# Food Security

## Food Security >> Cost of Food >> **Food Subsidies**

**Issues Identified:** *There is a lack of food subsidy programs – the existing Food Mail program is not widely known or understood and is not directly accessible by community members. Incentives do not exist to encourage stores to carry healthy food products.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
1	# and use of food programs	Local survey required – suggested questions: A) Food Quality in Labrador study (retailer survey): If the quality of fresh fruit and vegetables improved in your store, do you think you would sell more of these foods? B) Nutrition and Food Security in Kugaaruk survey: Where do you usually buy most of your food? From the Coop, from Yellowknife by Food Mail, or from the south by air cargo?
2	Incentives for stores to carry healthy food items	Local survey required – suggested questions: B) Food Quality in Labrador study (retailer survey): - If the quality of fresh fruit and vegetables improved in your store, do you think you would sell more of these foods? - If the quality of fresh food improved, would you: increase prices because customers would be willing to pay more? Lower prices, because you would have less spoilage? Continue to charge the same price?

**Data Sources:**

**A) Nutrition and Food Security in Kugaaruk, Nunavut. – Questions 500**  
 Find source at: [http://www.ainc-inac.gc.ca/ps/nap/air/rep2003/KugaRep03\\_e.pdf](http://www.ainc-inac.gc.ca/ps/nap/air/rep2003/KugaRep03_e.pdf)

**B) Food Quality in Six Isolated Communities in Labrador. – Questions 6/7**  
 Find source at: [http://www.ainc-inac.gc.ca/ps/nap/air/survfoo2001\\_e.PDF](http://www.ainc-inac.gc.ca/ps/nap/air/survfoo2001_e.PDF)

# Food Security

Food Security >> Cost of Food >> **Competitive Retailing**

**Issues Identified:** *Food costs were reduced in communities where there was competition between retailers.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
3	# of food retailers in the community for specific commodities	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Food Security

## Food Security >> Availability & Quality of Food >> **Food Transportation**

**Issues Identified:** *Transporting food to northern communities affects the cost, quality and availability of food for community members. Nutritious perishable foods are expensive to ship and vulnerable to damage from poor handling. As a result, store shelves are stocked with more easily transported, but less nutritional convenience foods. Transportation inefficiencies and poor handling procedures cause spoilage and delayed or lost shipments, resulting in increased cost and poorer food quality for northern residents. As well, community members feel there is a lack of respect by food handlers and distributors toward food destined to the north.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
4	Length of time for food to be delivered	Local survey required
5	# of delayed or lost shipments	Local survey required
6	Amount of nutritious fresh food available for purchase vs. less nutritious foods	Local survey required

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
7	<b>% of perishable food received in poor condition or not fit for consumption</b>	<p>Local survey required – suggested questions:</p> <p>A) Food Quality in Labrador study (retailer survey):</p> <ul style="list-style-type: none"> <li>- How would you describe the quality of the following kinds of food sold in your community? (List of fresh fruits/vegetables to choose from)</li> <li>- Since this time last year, has the quality of food in your community improved a lot, improved a little, stayed the same, become worse?</li> <li>- When do you find the quality of food to be best and worst?</li> <li>- How often do you get complaints from customers about food quality?</li> <li>- What do you think is the main cause of the problems you have with the quality of fresh food at this time of the year? (list of reasons...)</li> <li>- How much of the following foods have you thrown out because of poor quality or spoilage in a typical week? During the past three months? (list and amounts provided)</li> <li>- Can you list the foods where you have the greatest problem with quality?</li> <li>- Compensation information source: food handler company.</li> </ul>
8	<b>Compensation provided for food lost or received in condition not fit for consumption</b>	Local survey required

**Data Sources:**

A) Food Quality in Six Isolated Communities in Labrador. (Retailer survey questions 1/45/8/9/10/11)  
 Find source at: [http://www.ainc-inac.gc.ca/ps/nap/air/survfoo2001\\_e.PDF](http://www.ainc-inac.gc.ca/ps/nap/air/survfoo2001_e.PDF)

# Food Security

Food Security >> Availability & Quality of Food >> **Traditional Foods**

**Issues Identified:** *Making use of local food resources such as fish and wild game provides healthy food and ensures food is not subjected to transportation problems.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
9	Levels of hunting and fishing	<p>Local survey required – suggested questions and existing data found at:</p> <p>A) CBM Adult survey:</p> <ul style="list-style-type: none"> <li>- Where do you usually get your caribou meat? (List includes answer: "I hunt myself")</li> <li>- Did you go hunting for geese/ducks in the last year?</li> <li>- Did you go on the Fall hunt to [place name] this last Fall?</li> <li>- How many times have you taken a youth caribou hunting in the last year?</li> <li>- How many traps did you set in the past 6 months?</li> </ul> <p>A) CBM Youth survey:</p> <ul style="list-style-type: none"> <li>- How many traps did you set in the past 6 months?</li> <li>- Did you go hunting for geese/ducks in the past 6 months?</li> <li>- Did you go out to make dry-fish in the past 6 months?</li> <li>- Did you go on the Fall hunt this past fall?</li> </ul> <p>B) EAGLE Health Project Survey:</p> <ul style="list-style-type: none"> <li>- Does ____ do any fishing?</li> </ul> <p>C) <a href="http://www.statscan.ca">http://www.statscan.ca</a> &gt;&gt; (English / French) &gt;&gt; Community Profiles &gt;&gt; 2001 Aboriginal Peoples Survey Community Profiles or 2001 Aboriginal Population Profile &gt;&gt; Choose a community</p>
10	Traditional foods available by season	Local survey required

**Data Sources:****A) CBM: Community-Based Monitoring Project**

Find source at: [http://www.wkss.nt.ca/HTML/08\\_ProjectsReports/pdf/CBMFinal2002.pdf](http://www.wkss.nt.ca/HTML/08_ProjectsReports/pdf/CBMFinal2002.pdf)

Page 23: adult survey – Questions 14/21/23/27/20c

Page 34: youth survey – Questions 14/15/16/17

**B) EAGLE Project Survey – Question 28; Section G**

Find source at: [http://www.chiefs-of-ontario.org/eagle/tool\\_11.pdf](http://www.chiefs-of-ontario.org/eagle/tool_11.pdf)

**C) Statistics Canada: 2001 Community Profiles. Find source at: <http://www12.statcan.ca/english/profil01/PlaceSearchForm1.cfm>**

# Food Security

Food Security >> Availability & Quality of Food >> **Nutrition Education**

**Issues Identified:** *Access to nutritional information is seen as important to assist community members in making informed and healthy food choices. Demand for healthy food can mean more healthy food is available for purchase.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
11	# of nutrition education programs and attendance	Local survey required
12	# of cooking classes & attendance	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Food Security

Food Security >> Availability & Quality of Food >> **Food Programs**

**Issues Identified:** *Community food programs that provide nutritious food at schools and events are seen as a direct way of ensuring that community members are eating healthy.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
13	# and quality of snack programs in school / at events	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Food Security

Food Security >> Availability & Quality of Food >> **Collective Action**

**Issues Identified:** *Communities who act strategically and cooperatively to address food issues can reduce the cost and improve the quality of the food available.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
14	Bulk ordering and purchase of food	Local survey required
15	Good Food Box program and participation	Local survey required
16	# of community food programs and participation	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Tool Sheet – Food Security

Food Security >> Availability & Quality of Food >> **Nutrition Education**

**Issues Identified:** Access to nutritional education is seen as important to assist community members in making informed and healthy food choices. Demand for healthy food can mean more healthy food is available for purchase.

**Proposed Indicators:** **# 11** – # of nutrition education programs and attendance levels  
**# 12** – # of cooking classes

**Suggested Measures:** 1) Compare the number of nutrition programs available to the number required to address nutrition education needs in the community.  
 2) Compare the desired participation rates in nutrition programs with current participation rates.

**Information Source:** Local survey

**Note:** The nutrition programs offered in the calculation tools can be exchanged with cooking classes. They could also be specific to a certain group such as Elders or pre-natal women, or related to specific community health needs.

**How to use measure #1:**

- Step 1)** Identify the # (number) of nutrition programs needed within the community and the spaces needed within those programs.
- Step 2)** Identify the # of nutrition programs offered.
- Step 3)** Use the 'Indicator Calculation Tool #1' formula to calculate the measure.

Indicator Calculation Tool #1	Calculation Example
$\frac{(\ ) \text{ \# of nutrition programs offered } \times (\ ) \text{ spaces}}{(\ ) \text{ \# of nutrition programs needed } \times (\ ) \text{ spaces}} \times 100$ <p>= % needed programs available</p>	$\frac{(2) \text{ nutrition programs offered } \times (10) \text{ spaces}}{(3) \text{ nutrition programs needed } \times (10) \text{ spaces}} = .666 \times 100$ <p>= 67% of needed programs are available</p>
<p>X = multiplied by      ( ) = Insert number here      — = divided by</p>	

**What does this information mean?**

Two-thirds (67%) of the nutrition education needs within the community are being met by current programming. This information could be used to identify and support strategies to address educational gaps. Strategies may include program evaluation, program consolidation or proposals for additional programs and funding.

**How to use measure #2:**

- Step 1)** Identify the desired rate of participation in a particular nutrition program. This could also be broken down to a specific group (Elders, pre-natal women, etc.).
- Step 2)** Determine the current rate of participation in the program for the specific group, by using statistics collected by the program, or by conducting a local survey.
- Step 3)** Use the 'Indicator Calculation Tool #2' formula to calculate the measure.

Indicator Calculation Tool #2	Calculation Example
$\frac{(\quad) \text{ current \# of community members participating in program}}{(\quad) \text{ desired \# of community members participating in program}}$ $\frac{(\quad)}{(\quad)}$ $\times 100$ $= \% \text{ participating}$	$\frac{(75) \text{ community members participating in program}}{(180) \text{ desired community members participating in program}}$ $\frac{75}{180}$ $= .416 \times 100$ $= 42\% \text{ participating}$
<p>X = multiplied by      ( ) = Insert number here      — = divided by</p>	

**What does this information mean?**

Of the identified 180 community members who would benefit from the program, only 75 or 42% are participating. This information can be used to identify the need for further research to find out why the participation rate is low and to develop and support strategies to increase attendance.

# Services & Infrastructure

Defined as the availability and access to services and related infrastructure; respectfully delivered health and human services; adequate and affordable housing, recreation facilities and programming; and specialized services designed to meet the needs of Elders and youth.

## Indicators:

### Community Infrastructure

#### Sewer & Water

- 1 – houses with/without water & sewer
- 2 – water borne illnesses
- 3 – houses relying on bottled water

#### Locally Staffed

- 4 – treatment facilities without staff
- 5 – facility staff from community
- 6 – community staff training levels

Indicator #2

#### Roads

- 7 – accidents on roads
- 8 – repairs due to road conditions

### Service Delivery

#### Local

- 9 – services available in community
- 10 – health professionals in community
- 11 – visits by health professionals
- 12 – local service usage

13 – community training in ERT

14 – distance from services

#### Consistent

- 15 – frequency of health service delivery
- 16 – scheduled services delayed
- 17 – time to complete treatment plans
- 18 – treatment completed/compromised

### Compassionate

- 19 – wait time for appointment transport.
- 20 – compassionate policy exceptions
- 21 – cultural awareness programs

### Confidential

- 22 – service confidentiality guidelines
- 23 – staff trained on confidentiality

### Youth

- 24 – specific services for youth
- 25 – new funds for youth programs
- 26 – youth addiction treatment facilities

### Elders

- 27 – medical translator/companion

- 28 – meals on wheels program
- 29 – social gathering place for Elders
- 30 – programs & activities for Elders
- 31 – local palliative care for Elders

### Infrastructure

- 32 – size/capacity of facility
- 33 – suitability of facility
- 34 – facility usage
- 35 – proper equipment for facility

### Housing

#### Availability

- 36 – residents per house

... continued on next page

37 – generations per house

38 – Tuberculosis rates

39 – housing waiting lists

#### Quality

40 – houses in need of repair

41 – quality of housing insulation

42 – presence of black mold

43 – frequency of sewer back-ups

44 – accidents in the home

45 – EHO inspector visits

#### Elders

46 – housing units designed for Elders

47 – house maintenance for Elders

#### Affordable

48 – low cost housing units

49 – % of income required for housing

#### Jurisdiction Fragmentation

50 – agencies responsible for housing

51 – time to complete house repairs

#### Ownership

no indicators proposed

#### Recreation

##### Facilities

52 – type/condition of recreation facilities

53 – programs with proper equipment

#### Programming

54 – activities available

55 – summer activities available

56 – programs cancelled

57 – participation & retention levels

58 – age range of participants

#### Staffing

59 – funding for trained staff

60 – programs run by staff vs volunteers

61 – range of programs offered

62 – participation and retention levels

63 – support for recreation staff

#### Youth

64 – youth centre in community

65 – youth involved in programs

66 – school drop out rates

67 – school absentee rates

68 – youth alcohol and drug use

#### Promotion

Indicators #54, 57, 58

69 – direct contacts to provide information

#### Affordable

70 – cost of recreation to users

71 – volunteers assisting with programs

72 – utilization of existing resources

#### Technology

##### Current

73 – water/sewer technology used

##### High Speed Internet

74 – internet use in the community

75 – internet technology at health facility

76 – distance education enrolment

77 – internet reliability

#### Data Management

no indicators proposed

#### Service Sustainability

##### Sufficient Funding

78 – levels of program/service funding

79 – program needs met by funding

80 – vacant positions

##### Stable Funding

81 – long term vs short term funding

82 – duration of programs

83 – programs cancelled

84 – staff turnover rates

Indicator #80

85 – funding commitments honoured

#### Jurisdiction Fragmentation

86 – # agencies involved in funding

87 – resources allocated to administration

#### Participation

88 – service staff from community

89 – staff turnover rates

90 – mechanisms for participation

91 – health education and awareness

#### Collaboration

92 – community inter-agency meetings

93 – regional inter-agency meetings

94 – service delivery collaborations

#### Communication

95 – community newsletter

96 – community meetings

#### Realistic

Indicator #12

97 – proximity of duplicate services

98 – medical transport driver/patient ratio

99 – funder cutbacks re: abuse perception

#### Staffing

Indicator #21

# Services & Infrastructure

Services & Infrastructure >> Community Infrastructure >> **Sewer & Water**

**Issues Identified:** *Communities require adequate sewer and water treatment systems that use proper technology, meet current standards and are operated and maintained by trained staff.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
1	<b># of houses with/without adequate sewer and water services</b>	<p><i>Local survey required – suggested questions and existing data found at:</i></p> <p>A) <i>RHS (Adult survey):</i></p> <ul style="list-style-type: none"> <li>- What is the main water supply for your household? (List includes: local/community water supply; trucked, well; collect yourself from water plant; collect yourself from river, lake, pond; from a neighbour’s house)</li> <li>- Do you use any other sources of drinking water? (List includes: bottled water, water from another house, boiled tap water, river lake or stream).</li> <li>- Do you consider the main water supply in your home safe for drinking? - <i>Community level data for RHS survey exists: must be accessed by community.</i></li> </ul> <p>B) <a href="http://www.statscan.ca">http://www.statscan.ca</a> &gt;&gt; (English / French) &gt;&gt; Community Profiles &gt;&gt; 2001 Aboriginal Peoples Survey Community Profiles or 2001 Aboriginal Population Profile &gt;&gt; Choose a community</p>
2	<b># of illnesses caused from water borne diseases</b>	<p><i>Existing data found at:</i></p> <p>B) <a href="http://www.statscan.ca">http://www.statscan.ca</a> &gt;&gt; (English / French) &gt;&gt; Community Profiles &gt;&gt; 2001 Aboriginal Peoples Survey Community Profiles or 2001 Aboriginal Population Profile &gt;&gt; Choose a community</p>
3	<b># of houses relying on purchased drinking water</b>	Local survey required

**Data Sources:**

**A)** RHS: First Nations and Inuit Regional Longitudinal Health Survey (Adult survey) – Questions 29/30/31

Find source at: [http://www.naho.ca/firstnations/english/pdf/key\\_docs\\_adult.pdf](http://www.naho.ca/firstnations/english/pdf/key_docs_adult.pdf)

**B)** Statistics Canada: 2001 Community Profiles. Find source at: <http://www12.statcan.ca/english/profil01/PlaceSearchForm1.cfm>

# Services & Infrastructure

Services & Infrastructure >> Community Infrastructure >> **Locally Staffed**

**Issues Identified:** *Operation and maintenance of critical infrastructure (sewer & water) should be carried out by trained community members to avoid gaps in service that occur due to staff turnover and scheduling of outside staff.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
4	# of instances where treatment facilities are without staff members	Local survey required
5	# of community members who are employed in water/sewer facilities	Local survey required
6	% of community staff who are properly trained	Local survey required

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
	<p><b># of illnesses caused from water borne diseases</b></p>	<p>See Indicator 2</p>

**Data Sources:**

No indicator/survey source at this time

# Services & Infrastructure

Services & Infrastructure >> Community Infrastructure >> **Roads**

**Issues Identified:** *The quality of roads, both within communities and between communities where roads exist, is often poor, increasing the cost of vehicle maintenance and reducing mobility.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
7	# of accidents on roads	Local survey required
8	# of vehicle repairs due to road conditions	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Services & Infrastructure

Services & Infrastructure >> Service Delivery >> **Local**

**Issues Identified:** *Wherever possible, services should be available locally to enable people to remain in their communities. Where services have to be “brought in” to a community they should be designed to accommodate that purpose (i.e. mobility of health professionals). Community members should be trained in critical incident response in communities without resident trained personnel.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
9	# of services available in the community	Local survey required
10	# of health professionals who live in the community	Local survey required
11	# of health professional visits to the community	Local survey required

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
12	# of trips outside of community for service that is available locally	Local survey required
13	# of community members trained in ERT / First Responders; # training opportunities	Local survey required
14	Distance from services	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Services & Infrastructure

Services & Infrastructure >> Service Delivery >> **Consistent**

**Issues Identified:** *Services need to be regularly scheduled so that people know when they are available, and should be offered as scheduled, without changes, delays or cancellations.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
15	Frequency of (health) service delivery	Existing data found at: <a href="http://www.statscan.ca">http://www.statscan.ca</a> >> (English / French) >> Community Profiles >> 2001 Aboriginal Peoples Survey Community Profiles or 2001 Aboriginal Population Profile >> Choose a community
16	# of scheduled services changed, delayed or cancelled	Local survey required
17	Time period to complete treatment plans	Local survey required
18	# of treatment plans completed vs. compromised	Local survey required

**Data Sources:**

A) Statistics Canada: 2001 Community Profiles. Find source at: <http://www12.statcan.ca/english/profil01/PlaceSearchForm1.cfm>

# Services & Infrastructure

Services & Infrastructure >> Service Delivery >> **Compassionate**

**Issues Identified:** *Services delivered both within and outside the community should be delivered with compassion, respect and cultural awareness. Services should be designed (and modified as required) to minimize undue inconvenience and hardship for clients.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
19	<b>Waiting time for transportation from doctor appointment back to community</b>	Local survey required
20	<b># of policy exceptions requested / granted for compassionate reasons</b>	Local survey required
21	<b># of cultural awareness programs &amp; attendance rates</b>	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Services & Infrastructure

Services & Infrastructure >> Service Delivery >> **Confidential**

**Issues Identified:** *Services should be delivered in a confidential and professional manner.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
22	# of services with confidentiality guidelines	Local survey required
23	# of staff trained on guidelines	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Services & Infrastructure

Services & Infrastructure >> Service Delivery >> **Youth**

**Issues Identified:** *Specific services for youth are essential to keep youth engaged and healthy; those identified included a youth centre and targeted recreation, addictions, culture, mentoring and education programs.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
24	#, type and use of specific youth services, programs & facilities	Local survey required
25	Amount of new funds for youth programs (not reallocated funds)	Local survey required
26	Youth addiction treatment centre and/or mobile program	Local survey required

**Data Sources:** No indicator/survey source at this time

# Services & Infrastructure

Services & Infrastructure >> Service Delivery >> **Elders**

**Issues Identified:** *Services for Elders are seen as very important to ensuring they are involved in the community, are involved with youth, and have the necessary supports to allow them to remain in the community as they grow old.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
27	<p><b>Medical translation &amp; companion services available and funded</b></p>	<p>Local survey required</p>
28	<p><b>Meals on wheels program in community</b></p>	<p>Local survey required</p>
29	<p><b>Social gathering place for Elders (e.g. coffee house)</b></p>	<p>Local survey required</p>

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
30	# and type of activities and programs for Elders & participation	Local survey required
31	Palliative care available in community	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Services & Infrastructure

Services & Infrastructure >> Service Delivery >> **Infrastructure**

**Issues Identified:** *Services require suitable infrastructure to carry out identified activities (buildings, equipment, supplies).*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
32	Size / capacity of facility	Local survey required
33	Suitability of facility (daycare has windows)	Local survey required
34	Usage rates of facility (can indicate suitability)	Local survey required
35	Facility has proper equipment for designed use	Local survey required

**Data Sources:** No indicator/survey source at this time

# Services & Infrastructure

## Services & Infrastructure >> Housing >> **Availability**

**Issues Identified:** *A lack of housing units results in overcrowding, contributing to increased incidence of communicable diseases (esp. tuberculosis, and mental health issues (stress, alcohol & drug abuse). Loss of a housing space is a deterrent to those who wish to move temporarily from the community to pursue education.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
36	# of residents per house	Local survey required – suggested questions and existing data found at: A) CBM (Adult survey): - Do you think that your current house is overcrowded?  B) RHS (Adult survey): - How many children usually live in this household? - Including yourself, how many adults live in this household? - How many rooms are in your home? - <i>Community level data for RHS survey exists: must be accessed by community.</i>  C) <a href="http://www.statscan.ca">http://www.statscan.ca</a> >> (English / French) >> Community Profiles >> 2001 Aboriginal Peoples Survey Community Profiles or 2001 Aboriginal Population Profile >> Choose a community
37	# of generations per house	Local survey required
38	Tuberculosis rates	Local survey required

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
39	Housing waiting lists	Local survey required

**Data Sources:**

**A)** CBM: Community-Based Monitoring Project (Adult survey: page 23 in document; page 26 in PDF) – Question 18  
 Find source at: [http://www.wkss.nt.ca/HTML/08\\_ProjectsReports/PDF/CBMFinal2002.pdf](http://www.wkss.nt.ca/HTML/08_ProjectsReports/PDF/CBMFinal2002.pdf)

**B)** RHS: First Nations and Inuit Regional Longitudinal Health Survey (Adult survey) – Questions 19/20/25  
 Find source at: [http://www.naho.ca/firstnations/english/pdf/key\\_docs\\_adult.pdf](http://www.naho.ca/firstnations/english/pdf/key_docs_adult.pdf)

**C)** Statistics Canada: 2001 Community Profiles. Find source at: <http://www12.statcan.ca/english/profil01/PlaceSearchForm1.cfm>

# Services & Infrastructure

Services & Infrastructure >> Housing >> **Quality**

**Issues Identified:** *Many housing units are in disrepair, some without proper services such as sewer and water. Houses in poor condition contribute to accidental injuries and health hazards.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
40	# of housing repairs needed	Local survey required – suggested questions and existing data found at: A) CBM (Adult survey) (also found in Stats Can Community profiles): - % Housing in need of major repairs  B) <a href="http://www.statscan.ca">http://www.statscan.ca</a> >> (English / French) >> Community Profiles >> 2001 Aboriginal Peoples Survey Community Profiles or 2001 Aboriginal Population Profile >> Choose a community
41	Housing insulation quality	Local survey required
42	Presence of black mold	Local survey required
43	Frequency of sewer backups	Local survey required
44	# of accidents in the home	Local survey required

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
45	# of visits from EHO inspectors	Local survey required

**Data Sources:**

**A)** CBM: Community-Based Monitoring Project (Adult survey: page 23 in document; page 26 in PDF) – Question 19  
 Find source at: [http://www.wkss.nt.ca/HTML/08\\_ProjectsReports/PDF/CBMFinal2002.pdf](http://www.wkss.nt.ca/HTML/08_ProjectsReports/PDF/CBMFinal2002.pdf)

**B)** Statistics Canada: 2001 Community Profiles. Find source at: <http://www12.statcan.ca/english/profil01/PlaceSearchForm1.cfm>

# Services & Infrastructure

Services & Infrastructure >> Housing >> **Elders**

**Issues Identified:** *Housing that meets the special needs of Elders (mobility, restricted vision) is required along with programs that support Elders to remain in their homes and community.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
46	# of housing units specifically designed or modified for Elders	Local survey required
47	Level of assistance with house maintenance for Elders	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Services & Infrastructure

Services & Infrastructure >> Housing >> **Affordable**

**Issues Identified:** *An overall scarcity of housing units contributes to higher rents and a further lack of low-income housing units contributes to overcrowding, as those with low incomes move in with other family members. Frequent moves in search of better housing increases costs (i.e. re-hookup of utilities).*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
48	# of low cost housing units	Local survey required
49	% of income required for housing	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Services & Infrastructure

## Services & Infrastructure >> Housing >> **Jurisdiction Fragmentation**

**Issues Identified:** *Responsibility for provision and maintenance of housing units is multi-jurisdictional and results in gaps in availability and quality of housing.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
50	# of agencies responsible for housing	Local survey required
51	Time period to complete housing repairs	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Services & Infrastructure

Services & Infrastructure >> Housing >> **Ownership**

**Issues Identified:** *Unavailability of serviced lots for individual purchase and difficulties in obtaining financing are challenges to home ownership.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
	None proposed	Existing data found at: A) <a href="http://www.statscan.ca">http://www.statscan.ca</a> >> (English / French) >> Community Profiles >> 2001 Aboriginal Peoples Survey Community Profiles or 2001 Aboriginal Population Profile >> Choose a community

**Data Sources:**

A) Statistics Canada: 2001 Community Profiles. Find source at: <http://www12.statcan.ca/english/profil01/PlaceSearchForm1.cfm>

# Services & Infrastructure

Services & Infrastructure >> Recreation >> **Facilities**

**Issues Identified:** *Appropriate, well-maintained facilities are required to house recreation and leisure activities. Proper equipment is also needed for the activities to take place.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
52	# and type and condition of recreational facilities in the community	Local survey required
53	% of programs with proper equipment	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Services & Infrastructure

## Services & Infrastructure >> Recreation >> **Programming**

**Issues Identified:** *A range of recreation and leisure programs should allow for all community members to be involved in activities, facilitating year-round use (not just linked to school year) in all environments. Programs must be dependable - short term programs discourage participation.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
54	# and type of activities available	Local survey required
55	# of activities available during summer months	Local survey required
56	# of programs cancelled	Local survey required
57	Participation & retention levels	Existing data found at: A) <a href="http://www.statscan.ca">http://www.statscan.ca</a> >> (English / French) >> Community Profiles >> 2001 Aboriginal Peoples Survey Community Profiles or 2001 Aboriginal Population Profile >> Choose a community

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
58	Age range of participants in specific (i.e. using ice rink) and overall activities	Local survey required

**Data Sources:**

A) Statistics Canada: 2001 Community Profiles. Find source at: <http://www12.statcan.ca/english/profil01/PlaceSearchForm1.cfm>

# Services & Infrastructure

Services & Infrastructure >> Recreation >> **Staffing**

**Issues Identified:** *Funds must be available to hire staff who are trained in Recreation Services and can properly design, deliver and promote a broad range of programs and understand how to motivate and retain participation.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
59	Funding available to hire trained staff	Local survey required
60	# of programs run by trained staff vs. volunteers	Local survey required
61	Range of programs offered	Local survey required
62	Program participation & retention levels	Local survey required

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
63	Level of support for recreation staff	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Services & Infrastructure

Services & Infrastructure >> Recreation >> **Youth**

**Issues Identified:** *Providing recreational opportunities for youth is seen as one of the most important ways to keep youth engaged in the community and to provide an alternative to drug and alcohol use. A youth centre is seen as a critical facility.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
64	Youth centre in community	Local survey required
65	% of youth involved in programs	Local survey required
66	School drop out rates	Local survey required
67	School absentee rates	Local survey required

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
68	Levels of alcohol & drug use among youth	Local survey required

**Data Sources:**

A) Statistics Canada: 2001 Community Profiles. Find source at: <http://www12.statcan.ca/english/profil01/PlaceSearchForm1.cfm>

# Services & Infrastructure

Services & Infrastructure >> Recreation >> **Promotion**

**Issues Identified:** *Programs must be promoted to build community support and participation. Individual contact is seen as important, as well as a group participation approach to keep up motivation (i.e. walking group).*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
	# and type of activities available	See Indicator 54
	Program participation & retention levels	See Indicator 57
	Age range of participants	See Indicator #58
69	# of direct contacts to provide information on activities	Local survey required

**Data Sources:** No indicator/survey source at this time

# Services & Infrastructure

Services & Infrastructure >> Recreation >> **Affordable**

**Issues Identified:** *Services and programs must be affordable for community members as user fees can be a deterrent to usage. Finding ways to utilize the resources within the community can reduce funding requirements.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
70	<b>Cost of recreation activities to users</b>	Local survey required
71	<b># of volunteers assisting with recreation programs</b>	Local survey required
72	<b># of existing community resources utilized for recreation (e.g. outside rink; field for ball diamond; walking trails; lake)</b>	Local survey required

**Data Sources:** No indicator/survey source at this time

# Services & Infrastructure

Services & Infrastructure >> Technology >> **Current**

**Issues Identified:** *Communities must have access to appropriately current technology (structures, systems, processes, equipment and training) to properly operate and maintain services and infrastructure.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
73	Water & sewer treatment technologies in use	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Services & Infrastructure

## Services & Infrastructure >> Technology >> **High Speed Internet**

**Issues Identified:** *Access to reliable high speed internet is crucial to enable the use of new technology in the health facility, to access distance educational opportunities, to access information and resources, and to facilitate a broad range of communication needs.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
74	Internet use in the community	<p>Local survey required – suggested questions and existing data found at:</p> <p>A) Aboriginal Peoples Adult Survey (Communications section, questions 4, 5):</p> <ul style="list-style-type: none"> <li>- In the past twelve months, did you use the Internet?</li> <li>- Where have you used the Internet in the past twelve months?</li> </ul> <p>Aboriginal Peoples Adult Survey (Education section, question 26)</p> <ul style="list-style-type: none"> <li>- Did you take any of your postsecondary courses by correspondence or through some other form of distance education? By “distance” we mean education received via mail or electronic media such as television, CD-ROM or the Internet?</li> </ul> <p>B) <a href="http://www.statscan.ca">http://www.statscan.ca</a> &gt;&gt; (English / French) &gt;&gt; Community Profiles &gt;&gt; 2001 Aboriginal Peoples Survey Community Profiles or 2001 Aboriginal Population Profile &gt;&gt; Choose a community</p>
75	Internet technology in use at health care facility	Local survey required

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
76	# of community members enrolled in distance education courses	Local survey required
77	# of minutes of interrupted/unavailable internet service	Local survey required

**Data Sources:**

**A)** Statistics Canada: 2001 Aboriginal Peoples Survey (Adult) – Question 4/5 (Communications Section) & Question 26 (Education Section)  
 Find source at: [http://www.statcan.ca/english/sdds/instrument/3250\\_Q1\\_V1\\_E.pdf](http://www.statcan.ca/english/sdds/instrument/3250_Q1_V1_E.pdf)

**B)** Statistics Canada: 2001 Community Profiles. Find source at: <http://www12.statcan.ca/english/profil01/PlaceSearchForm1.cfm>

# Services & Infrastructure

Services & Infrastructure >> Technology >> **Data Management**

**Issues Identified:** *Data collection systems and trained staff are required to collect and manage the information necessary to conduct needs assessments, obtain funding and other resources, provide accountability and conduct program evaluation.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
	None proposed	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Services & Infrastructure

## Services & Infrastructure >> Service Sustainability >> **Sufficient Funding**

**Issues Identified:** *In order to be effective and produce desired outcomes, services require sufficient funding (budget) to carry out identified activities.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
78	Levels of program/ service funding	Local survey required
79	% of program/ service needs met by funding	Local survey required
80	# of vacant positions	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Services & Infrastructure

Services & Infrastructure >> Service Sustainability >> **Stable Funding**

**Issues Identified:** *Services require stable, long-term funding to allow for planning and evaluation, and to develop community commitment and support. It is important that funding commitments made to communities are honoured.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
81	Duration dates of funding agreements	Local survey required
82	Duration of programs	Local survey required
83	# of programs cancelled	Local survey required
84	Staff turnover rates	Local survey required
	# of vacant positions	See Indicator 80

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
85	# of funding commitments met vs. not kept	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Services & Infrastructure

## Services & Infrastructure >> Service Sustainability >> **Jurisdiction Fragmentation**

**Issues Identified:** *Responsibility for services and programs is multi-jurisdictional and results in “patchwork” program and service delivery that is administratively intensive. A myriad of budget and statistical reporting requirements uses a great deal of the resources which could be spent on direct service or program delivery.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
86	# of agencies involved in funding specific/overall services and programs	Local survey required
87	% of resources allocated to administration	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Services & Infrastructure

Services & Infrastructure >> Service Sustainability >> **Participation**

**Issues Identified:** *Involving community (Aboriginal) members in service planning and delivery can ensure appropriate programs and services, minimize gaps in service created by staff turnover, provide employment, and build community support and capacity.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
88	# of community members employed/ involved in service delivery	Local survey required
89	Staff turnover rates	Local survey required
90	# and type of mechanisms for community participation (planning meetings, committees)	Local survey required

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
91	# of health education opportunities for community members	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Services & Infrastructure

Services & Infrastructure >> Service Sustainability >> **Collaboration**

**Issues Identified:** *Communication and coordination of services within communities and between agencies, can improve the range of services and delivery options available.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
92	# of community inter-agency meetings	Local survey required
93	# of regional inter-agency meetings	Local survey required
94	# of collaborative service delivery initiatives	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Services & Infrastructure

Services & Infrastructure >> Service Sustainability >> **Communication**

**Issues Identified:** *Communication must exist between service providers and the community to ensure members are aware of, use, and support the service.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
95	Community newsletter & distribution/ readership	Local survey required
96	# of community meetings held and attendance rates	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Services & Infrastructure

Services & Infrastructure >> Service Sustainability >> **Realistic**

**Issues Identified:** *To realistically meet the needs of the community, factors such as service area population, demand, use, cost, proximity of like services, etc. must be considered in service planning and delivery. Awareness is needed of what constitutes abuse of services vs. acceptable use.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
	# of trips outside of community for service that is available locally	See Indicator 12
97	Proximity of duplicate services	Local survey required
98	Medical transportation driver/patient ratio	Local survey required
99	# of funder cutbacks due to perception of abuse	Local survey required

**Data Sources:**

No indicator/survey source at this time

# Services & Infrastructure

Services & Infrastructure >> Service Sustainability >> **Staffing**

**Issues Identified:** *High rates of staff turnover negatively impact programs in many ways including causing service gaps and reducing service dependability and usage. An understanding of cultural and geographic realities for non-Aboriginal and non-northern staff is seen as a way to reduce staff turnover and connect workers to the community.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
	<p><b># of cultural awareness programs &amp; attendance rates</b></p>	<p>See Indicator 21</p>

**Data Sources:**

No indicator/survey source at this time

# Tool Sheet – Services & Infrastructure

## Services & Infrastructure >> Service Delivery >> **Medical Translation & Companion Services**

**Issues Identified:** Medical translation and companion services are important for the quality of care, safety and comfort of community members traveling outside the community for medical services. With the assistance of a translator, Elders can communicate their needs and understand the care they receive. Safety issues for both Elders and youth can be addressed by traveling with a companion, which can also reduce the stress of such trips.

**Proposed Indicator:** **# 27** – Medical translation and companion services available and funded

**Suggested Measure:** Compare the number of medical trips where translation and/or companion services are provided to the number of medical trips where these services were requested, or were deemed to be needed, but were not provided.

**Information Source:** Local survey

### **How to use this measure:**

- Step 1)** Identify the # (number) of medical trips where translator or companion was requested or deemed to be needed, within a given timeframe. This could also be broken down by group (i.e. Elders, youth).
- Step 2)** Identify the # of trips where a translator or companion was provided and funded, within the timeframe (and for the specific group).
- Step 3)** Use the 'Indicator Calculation Tool' formula to calculate the measure.

Indicator Calculation Tool	Calculation Example
$\frac{(\quad) \text{ trips - translator/companion provided}}{(\quad) \text{ trips - translator/companion requested or needed but not provided}} \times 100$ <p>= % translation/companion needs met</p>	$\frac{15 \text{ trips - translator/companion provided}}{25 \text{ trips - translator/companion requested or needed but not provided}} \times 100$ <p>= 60% translation/companion needs met</p>
<p>X = multiplied by      ( ) = Insert number here      — = divided by</p>	

### **What does this information mean?**

Only ten percent (60%) of the needed or requested translation or companion services are being provided. This information could be used to demonstrate the need for more funded services, or to identify the level of service provided to particular groups, such as Elders.

# Healthy Lifestyles

Healthy lifestyles relate to positive personal life choices that include proper diet and physical activity and that build respectful healthy relationships with family and community. It involves making life choices that contribute to and foster the development of positive self-esteem within the individual.

## Indicators:

### Self Care

#### Healthy Eating

no indicators proposed

#### Healthy Socializing

no indicators proposed

#### Healthy Self-Image

1 – girls saying no to sex

#### Medical Treatment

2 – taking medications as prescribed

3 – attendance at support groups

4 – appointments kept vs missed

5 – comfort disclosing health issues

#### Healthy Home

6 – keeping regular bedtime hours

7 – limiting TV/video game use

#### Hygiene

8 – practicing good personal hygiene

### Participation

#### Social Activities

9 – participation in community events

10 – organizing/volunteering at events

#### Physical Activities

11 – walking

12 – weight and fitness training

13 – playing sports

14 – skating

#### Elders & Youth

15 – Elder/youth activities

### Motivation

#### Programming

16 – activities available

17 – programs cancelled

18 – program participation and retention

19 – age range of participants

#### Promotion

20 – direct contacts to provide information

#### Environmental Concerns

21 – walking groups

... continued on next page

### Affordability

22 – cost of recreation to users

23 – recreation volunteers

### Early Engagement

24 – youth participation rates

25 – youth programs

26 – recreation leader to inspire youth

### Nutrition / Fitness Awareness

27 – nutrition & fitness programs

# Healthy Lifestyles

Healthy Lifestyles >> Self-Care >> **Healthy Eating**

**Issues Identified:** *Choosing to eat a balanced diet including fresh fruit and vegetables and traditional foods such as caribou, moose, elk, fish and berries.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
	None proposed	<p>Local survey required – suggested questions:</p> <p>A) Health Canada Nutrition Survey:            Question 21-Are you currently eating or trying to eat healthier?            Q22-How long have you been eating or trying to eat healthier, would you say 6 months or less, or for more than 6 months?</p> <p>B) RQH Adult/Adolescent/Child survey:            Question 59/29/50-Do you eat a nutritious balanced diet?            Q 61/31/52-In the past 12 months, how often have you eaten the following traditional foods? (List includes a choice of 10 traditional foods) - <i>Community level data for RHS survey exists: must be accessed by community.</i></p>

**Data Sources:**

**A)** Health Canada Nutrition Survey – Questions 21/22

Find source at: [http://www.hc-sc.gc.ca/fn-an/alt\\_formats/hpfb-dgpsa/pdf/food-guide-aliment/rev\\_cons\\_quant\\_quest-rech\\_quant\\_cons\\_disc\\_e.pdf](http://www.hc-sc.gc.ca/fn-an/alt_formats/hpfb-dgpsa/pdf/food-guide-aliment/rev_cons_quant_quest-rech_quant_cons_disc_e.pdf)

**B)** RHS: First Nations and Inuit Regional Longitudinal Health Survey (Adult survey) – Questions 59/61

Find source at: [http://www.naho.ca/firstnations/english/pdf/key\\_docs\\_adult.pdf](http://www.naho.ca/firstnations/english/pdf/key_docs_adult.pdf)

**B)** RHS: First Nations and Inuit Regional Longitudinal Health Survey (Adolescence survey) – Questions 29/31

Find source at: [http://www.naho.ca/firstnations/english/pdf/key\\_docs\\_adolescent.pdf](http://www.naho.ca/firstnations/english/pdf/key_docs_adolescent.pdf)

**B)** RHS: First Nations and Inuit Regional Longitudinal Health Survey (Child survey) – Questions 50/ 52

Find source at: [http://www.naho.ca/firstnations/english/pdf/key\\_docs\\_children.pdf](http://www.naho.ca/firstnations/english/pdf/key_docs_children.pdf)

# Healthy Lifestyles

Healthy Lifestyles >> Self-Care >> **Healthy Socializing**

**Issues Identified:** *Avoiding the use of alcohol and drugs when socializing.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
	None proposed	Local survey required

**Data Sources:**

No existing indicator/survey source at this time.

# Healthy Lifestyles

Healthy Lifestyles >> Self-Care >> **Healthy Self-Image**

**Issues Identified:** *Having a healthy self-image means respecting yourself, respecting your body, avoiding the use of steroids (body building) or excessive dieting to obtain unrealistic body images, and making independent decisions without giving in to peer pressure.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
1	Girls saying no to sex	Local survey required

**Data Sources:**

No indicator/survey source at this time.

# Healthy Lifestyles

Healthy Lifestyles >> Self-Care >> **Medical Treatment**

**Issues Identified:** *Following treatment plans to ensure that health issues are addressed and complications are avoided; being comfortable with disclosing health issues to health professionals and support groups.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
2	Taking medications as prescribed	Local survey required
3	Attendance at support groups	Local survey required
4	# of medical appointments kept/missed	Local survey required
5	Comfort levels with disclosing health issues	Existing data found at: A) <a href="http://www.statscan.ca">http://www.statscan.ca</a> >> (English / French) >> Community Profiles >> 2001 Aboriginal Peoples Survey Community Profiles or 2001 Aboriginal Population Profile >> Choose a community

**Data Sources:**

A) Statistics Canada: 2001 Community Profiles. Find source at: <http://www12.statcan.ca/english/profil01/PlaceSearchForm1.cfm>

# Healthy Lifestyles

Healthy Lifestyles >> Self-Care >> **Healthy Home**

**Issues Identified:** *Providing a good environment for children to grow up in.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
6	Keeping regular bedtime hours	Local survey required
7	Limiting TV/video game use	Local survey required – suggested questions and existing data found at: A) RHS Child/Adolescent survey: Question 57/69 - On average, about how many hours per week does ____ watch TV? Play video games? - <i>Community level data for RHS survey exists: must be accessed by community.</i>  B) <a href="http://www.statscan.ca">http://www.statscan.ca</a> >> (English / French) >> Community Profiles >> 2001 Aboriginal Peoples Survey Community Profiles or 2001 Aboriginal Population Profile >> Choose a community

**Data Sources:**

A) RHS: First Nations and Inuit Regional Longitudinal Health Survey (Adolescence survey) - Question 69  
 Find source at: [http://www.naho.ca/firstnations/english/pdf/key\\_docs\\_adolescent.pdf](http://www.naho.ca/firstnations/english/pdf/key_docs_adolescent.pdf)

A) RHS: First Nations and Inuit Regional Longitudinal Health Survey (Child survey) – Questions 57  
 Find source at: [http://www.naho.ca/firstnations/english/pdf/key\\_docs\\_children.pdf](http://www.naho.ca/firstnations/english/pdf/key_docs_children.pdf)

B) Statistics Canada: 2001 Community Profiles. Find source at: <http://www12.statcan.ca/english/profil01/PlaceSearchForm1.cfm>

# Healthy Lifestyles

Healthy Lifestyles >> Self-Care >> **Hygiene**

**Issues Identified:** *Practicing good personal hygiene.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
8	Practicing good personal hygiene	Local survey required

**Data Sources:**

No indicator/survey source at this time.

# Healthy Lifestyles

Healthy Lifestyles >> Participation >> **Social Activities**

**Issues Identified:** *Being active and involved in the community through cultural, spiritual, social, recreational and sporting events.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
9	Attendance / participation in community events	Local survey required
10	Organizing or volunteering at community events	Local survey required – suggested questions: A) CBM: Community-Based Monitoring Project Question 28/21 - How many times have you volunteered for a community event (e.g. feast/helping Elder) in the last year?

**Data Sources:**

A) CBM: Community-Based Monitoring Project (Adult survey: page 23 in document; page 26 in PDF) – Question 28  
Find source at: [http://www.wkss.nt.ca/HTML/08\\_ProjectsReports/PDF/CBMFinal2002.pdf](http://www.wkss.nt.ca/HTML/08_ProjectsReports/PDF/CBMFinal2002.pdf)

A) CBM: Community-Based Monitoring Project (Youth survey: page 34; page 37 in PDF) – Question 28  
Find source at: [http://www.wkss.nt.ca/HTML/08\\_ProjectsReports/PDF/CBMFinal2002.pdf](http://www.wkss.nt.ca/HTML/08_ProjectsReports/PDF/CBMFinal2002.pdf)

# Healthy Lifestyles

## Healthy Lifestyles >> Participation >> **Physical Activities**

**Issues Identified:** *Participating in recreational activities that involve physical exercise and fitness.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
11	Walking	Local survey required– suggested questions and existing data found at: A) RHS Adolescent/Adult/Child survey: Question 33/-/54-How often do you participate in any kind of physical activity (either at school or at home, or in your free time? - <i>Community level data for RHS survey exists: must be accessed by community.</i>
12	Weight and fitness training	Local survey required – suggested questions and existing data found at: A) RHS Adolescent/Adult/Child survey: Q35/63/55-What types of physical activities have you participated in during the last 12 months? (List of activities) - - <i>Community level data for RHS survey exists: must be accessed by community.</i> B) <a href="http://www.statscan.ca">http://www.statscan.ca</a> >> (English / French) >> Community Profiles >> 2001 Aboriginal Peoples Survey Community Profiles or 2001 Aboriginal Population Profile >> Choose a community
13	Playing sports	Local survey required – suggested questions and existing data found at: A) RHS Adolescent/Adult/Child survey: Q 68/-/56-Outside of school hours, how often do you: ...Take part in sports teams or lessons - <i>Community level data for RHS survey exists: must be accessed by community.</i> B) <a href="http://www.statscan.ca">http://www.statscan.ca</a> >> (English / French) >> Community Profiles >> 2001 Aboriginal Peoples Survey Community Profiles or 2001 Aboriginal Population Profile >> Choose a community
14	Skating	Local survey required

**Data Sources:**

**A)** RHS: First Nations and Inuit Regional Longitudinal Health Survey (Adult survey) – Questions 63

Find source at: [http://www.naho.ca/firstnations/english/pdf/key\\_docs\\_adult.pdf](http://www.naho.ca/firstnations/english/pdf/key_docs_adult.pdf)

**A)** RHS: First Nations and Inuit Regional Longitudinal Health Survey (Adolescence survey) – Questions 33/35/68

Find source at: [http://www.naho.ca/firstnations/english/pdf/key\\_docs\\_adolescent.pdf](http://www.naho.ca/firstnations/english/pdf/key_docs_adolescent.pdf)

**A)** RHS: First Nations and Inuit Regional Longitudinal Health Survey (Child survey) – Questions 54/55/56

Find source at: [http://www.naho.ca/firstnations/english/pdf/key\\_docs\\_children.pdf](http://www.naho.ca/firstnations/english/pdf/key_docs_children.pdf)

**B)** Statistics Canada: 2001 Community Profiles. Find source at: <http://www12.statcan.ca/english/profil01/PlaceSearchForm1.cfm>

# Healthy Lifestyles

Healthy Lifestyles >> Participation >> **Elders & Youth**

**Issues Identified:** *Special programs that encourage Elders and youth to engage in community activities and to spend time together are seen as important.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
15	# of activities where Elders and youth participate together	Local survey required

**Data Sources:**

No indicator/survey source at this time.

# Healthy Lifestyles

Healthy Lifestyles >> Motivation >> **Programming**

**Issues Identified:** *A range of recreation and leisure programs should allow for all community members to be involved in activities, facilitating year-round use in all environments. Programs must be dependable – short term programs discourage participation.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
16	# and type of activities available	Local survey required
17	# of programs cancelled	Local survey required
18	Participation & retention levels	Local survey required
19	Age range of participants in specific and overall activities	<b>Local survey required</b>

**Data Sources:**

No indicator/survey source at this time.

# Healthy Lifestyles

Healthy Lifestyles >> Motivation >> **Promotion**

**Issues Identified:** *Programs must be promoted to build community support and participation. Individual contact is seen as important – community involvement to improve participation in activities can build community support.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
20	# of direct contacts to provide information on activities	Local survey required

**Data Sources:**

No indicator/survey source at this time.

# Healthy Lifestyles

Healthy Lifestyles >> Motivation >> **Environmental Conditions**

**Issues Identified:** *Environmental conditions such as weather, black flies and bears can reduce the motivation of community members to participate in outdoor activities; participating in groups is seen as safer.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
21	# of walking groups and # of outings	Local survey required

**Data Sources:**

No indicator/survey source at this time.

# Healthy Lifestyles

Healthy Lifestyles >> Motivation >> **Affordability**

**Issues Identified:** *Programs must be affordable for community members as user fees can be a deterrent to usage.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
22	Cost of recreation activities to users	Local survey required
23	# of volunteers assisting with recreation programs	Local survey required

**Data Sources:**

No indicator/survey source at this time.

# Healthy Lifestyles

Healthy Lifestyles >> Motivation >> **Early Engagement**

**Issues Identified:** *A focus on engaging youth in recreation and sports is important to set a lifelong pattern of physical exercise and to alleviate boredom.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
24	Youth participation rates	Local survey required
25	# of programs specific to youth	Local survey required
26	Recreation “leader” in community to inspire youth	Local survey required

**Data Sources:**

No indicator/survey source at this time.

# Healthy Lifestyles

Healthy Lifestyles >> Motivation >> **Nutrition / Fitness Awareness**

**Issues Identified:** *Awareness derived from nutrition and health education programs can motivate people to participate in physical activities and to eat healthy.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
27	Availability of nutrition/fitness programs and attendance levels	Local survey required

**Data Sources:**

No indicator/survey source at this time.

# Healthy Lifestyles

## Healthy Lifestyles >> Participation >> **Physical Activities**

**Issues Identified:** Participating in recreational activities that involve physical exercise and fitness.

**Proposed Indicator:** **# 13 – Playing Sports**

**Suggested Measure:** Compare the desired participation rates in recreational activities with current participation rates.

**Information Source:** Existing data and suggested questions that could be used in a local survey are provided below. These are focused on children (6-14). Limitations to the existing data are noted below (see \*).

A) RHS Adolescent/Adult/Child survey: [http://www.naho.ca/firstnations/english/pdf/key\\_docs\\_adolescent.pdf](http://www.naho.ca/firstnations/english/pdf/key_docs_adolescent.pdf)

Question 68 - Outside of school hours, how often do you: ... Take part in sports teams or lessons?

*Note: Community level data for RHS survey exists; must be accessed by community.*

B) <http://www.statscan.ca/> >> (English / French) >> Community Profiles >> 2001 Aboriginal Peoples Survey Community Profiles >> Choose: Child / Saskatchewan / Choose a Community

<b>How often child plays sports per week:</b>	
Never or less than once (%)	
One or more times (%)	

C) For specific recreation information that includes past and upcoming events in the Athabasca region go to:

<http://www.nrcc.sk.ca/>

---

### **How to use this measure:**

**Step 1)** Identify the desired rate of participation in sports activities for the age group (example: 6-14; 15-18).

**Step 2)** Determine the current rate of participation for the age group, by using existing data (as in the table above) or by conducting a local survey. Suggested survey questions can be found in the Regional Health Survey (RHS) as well as the 2001 Aboriginal Peoples' Survey Community Profiles.

**Step 3)** Use the 'Indicator Calculation Tool' formula to calculate the measure.

Indicator Calculation Tool	Calculation Example
$\frac{(\quad) \text{ current \# of youth participating in sport activities}}{(\quad) \text{ desired \# of youth participating in sport activities}}$ $\frac{(\quad)}{(\quad)} \times 100 = \% \text{ participating}$	$\frac{(375) \text{ current \# of youth participating in sport activities}}{(500) \text{ desired \# of youth participating in sport activities}}$ $\frac{375}{500} = .75 \times 100 = 75\% \text{ participating}$
<b>X</b> = multiplied by      ( ) = Insert number here      _____ = divided by	

**What does this information mean?**

Of the 500 identified as the desired participation number for the age group identified, 75% are currently participating in sports. This information could be used to set targets and determine what additional resources and strategies are needed to recruit the remaining 25% of youth into sports activities. Statistics on participation levels can be also used to support funding proposals.

**\* Limitations of the Existing Data:**

Existing data do not show the participation levels of all age groups, nor do they indicate the type of sports program or activities being participated in. As not all community members took part in the Regional Health Survey or the 2001 Aboriginal Peoples' Survey, the data may not accurately reflect the participation levels in a particular community, and should be used with caution.

First Nation's Health Development:  
Tools for Program Planning and Evaluation  
*Research Project*

## METHODS

# Table of Contents

A. <a href="#">Introduction</a> .....	1
B. <a href="#">Research Design</a>	
1) Participatory Design .....	3
2) Negotiating Community Consent .....	3
3) Data Collection & Analysis .....	4
• Development of Logic Models .....	4
• Key Informant Interviews with Health Directors .....	6
• Focus Groups with Community Members .....	7
C. <a href="#">Development of Community Health Framework &amp; Indicators</a> .....	8
D. <a href="#">Pilot Testing the Framework &amp; Indicators</a> .....	10
<a href="#">References</a> .....	11
APPENDICES .....	12
<a href="#">Appendix A – Map of Northern Saskatchewan with Research Communities</a>	
<a href="#">Appendix B – Memorandum of Agreement to Participate</a>	
<a href="#">Appendix C – What Is a Logic Model?</a>	
<a href="#">Appendix D – List of Program Logic Models</a>	
<a href="#">Appendix E – Logic Model Source Documents</a>	
<a href="#">Appendix F – Generic Logic Models</a>	
<a href="#">Appendix G – Phase I Interview Questions – Key Informants</a>	
<a href="#">Appendix H – Draft Evaluative Indicators Framework</a>	
<a href="#">Appendix I – Phase II Interview Questions – Focus Groups</a>	
<a href="#">Appendix J – Final Community Health Indicators Framework</a>	
<a href="#">Appendix K – An Example from the Toolkit</a>	
LIST OF TABLES & FIGURES	
<a href="#">Figure 1 – Project Logic Model</a> .....	2
<a href="#">Table 1 – Focus Group Participants</a> .....	7
<a href="#">Table 2 – Community Health Indicators Framework Components</a> .....	9

## A. Introduction

### **Background**

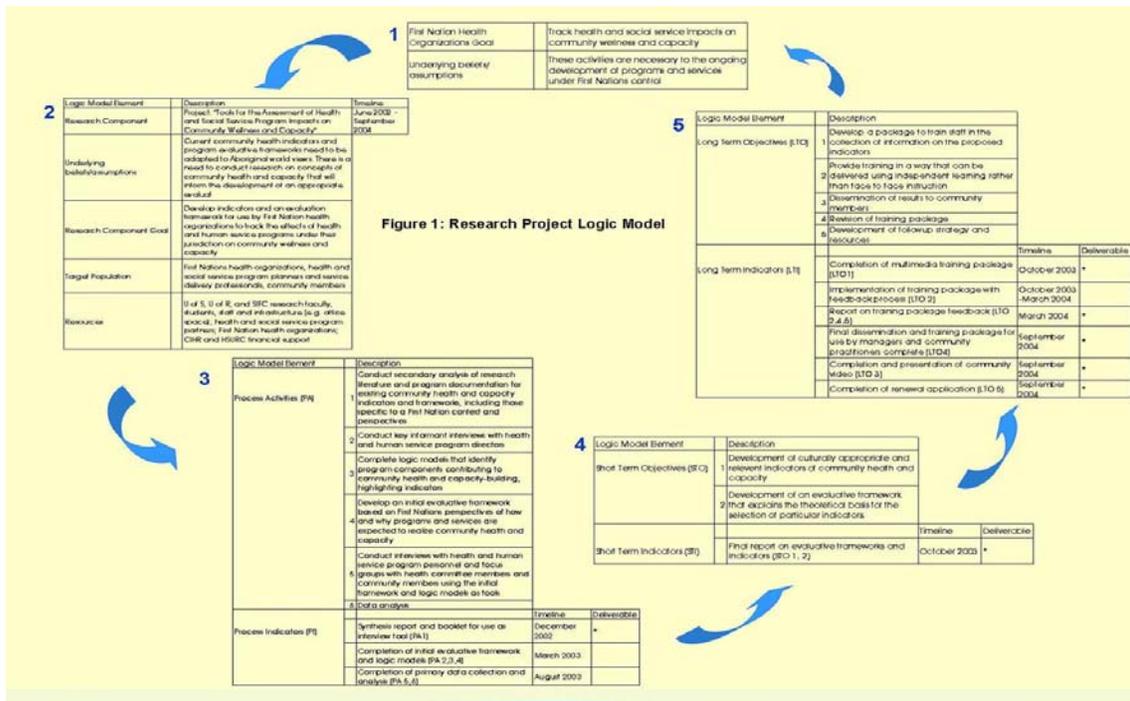
In the process of conducting the 2002 evaluation of transferred health services from First Nations and Inuit Health Branch (FNIHB) to the Prince Albert Grand Council (PAGC) in Saskatchewan, PAGC health managers expressed a desire to address questions beyond the scope and capacity of the evaluation but that they feel are relevant to the ongoing development of health services in their member communities. They were especially interested in the issue of the health effects of other human services (i.e. social development and recreation programs) on community wellness and capacity. PAGC health managers were especially interested in determining what information communities could collect to track and monitor their progress in the areas of community health and capacity outcomes.

This project, the First Nation's Health Development: Tools for Program Planning and Evaluation, builds on the 2002 evaluation to consider these issues. Here we describe the processes and activities undertaken between October 2002 and October 2005 to conduct the research.

### **Project Objectives**

The objectives of this research project were to develop an evaluation framework and indicators for use by First Nations health organizations to track the effects of health and human service programs under their jurisdiction. Underlying the identification of appropriate indicators was the need to conduct research on local level concepts of community health and capacity to inform the development of an appropriate evaluative framework within which to situation programs, activities and indicators (see Figure 1).

**Figure 1**  
**Research Project Logic Model**



**Location**

The research took place in communities selected by the community partners within the Prince Albert Grand Council district in the northern geographic area of Saskatchewan (see Appendix A). The PAGC communities included in this project were: Wahpeton Dakota Nation, Cumberland House Cree Nation, Red Earth Cree Nation, Fond du Lac Denesuline Nation, Black Lake Denesuline Nation and Hatchet Lake Denesuline Nation. During the time of this project, the newly formed Athabasca Health Authority (AHA), assumed responsibility for health service delivery in the Athabasca region (i.e., Black, Lake, Fond du Lac) and at the request of the Chief Executive Officer, we also included the three provincial communities serviced by AHA. These communities, with a significant population of First Nations and Aboriginal people, are Stony Rapids, Camsell Portage and Uranium City.

## B. RESEARCH DESIGN

### 1) Participatory Design

A participatory research design was used with a team that included university researchers and managers of three First Nations health organizations: the Prince Albert Grand Council (PAGC), the Athabasca Health Authority and the Northern Inter-Tribal Health Authority.

Individual communities were consulted prior to interviews to confirm their interest and participation in the project, and meetings were held throughout the duration of the project to provide regular updates to the First Nation research partners and community Health Directors.

Significant effort was made to keep the research process iterative, both by the strategies employed in data collection and analysis and by the participation process of the research communities. Community Health Directors and First Nations research partners provided advice and feedback at key points in the project, including reviewing focus group questions prior to their introduction in community meetings, and critiquing several iterations of the draft framework, indicators

### 2) Negotiating Community Consent

It was important to first introduce the project to potential participant communities before beginning data collection at any level. Because the Health Directors in each of the six First Nation communities had been identified as the key informants and community level contacts, a project presentation was made to a meeting of the Prince Albert Grand Council (PAGC) Health and Social Development Working Group (HSDWG), a forum in which all PAGC Health Directors participate. This group remained the main communication conduit for the participating communities. Meetings were also held with senior managers of PAGC, AHA and NITHA early on in the project.

In addition to the individual consent process for interviews and focus groups, we also negotiated community consent with the leadership of each of the participating First Nation communities. A Memorandum of Agreement to Participate (Appendix B) was developed for Health Directors to take to their leadership for review and approval. This document outlined both the assistance to be provided by the Health Directors to the project and the products the researchers and the project would return to the community.

Measures to ensure confidentiality were outlined in the ethics application approved by the university and communicated to the communities and research partners during the development of the Memorandum of Agreement to Participate, as well as during individual interviews and focus groups. Measures included a Confidentiality Declaration form signed by research team members and staff who would have access to the interview data. Confidentiality issues related to the small number of key informants were managed by ensuring that comments of individual participants would not be identifiable in reported findings. Interview data is kept in a locked cabinet at the SPHERU Prince Albert office. Interviews and focus group discussions were taped using digital recording equipment. We ensured that copies of digital files, both actual interview audio files and transcription files were deleted from any computers they may have been placed on for working purposes. A set of digital files is stored password-protected in the locked cabinet along with the interview transcriptions.

### 3) Data Collection & Analysis

The project included three levels of data collection:

- Collection and analysis of secondary data to create program logic models, and informal interviews with program managers to confirm logic model accuracy;
- Key informant interviews with Health Directors in each First Nation community;
- Focus groups with community members in six First Nation and three provincial communities to validate and expand the draft framework and indicators.

#### **Development of Logic Models**

The first step in the data collection involved obtaining information on health and human service programs delivered at the community level in order to build program logic models<sup>1</sup>. This was done both to help the researchers understand the community based programs and to provide an evaluation and planning tool to the program managers. A detailed description of a logic model is contained in Appendix C.

Although there were nine communities involved in the project, six First Nation and three provincial communities, logic models were created only for the programs delivered in the

---

<sup>1</sup> A logic model is a summarized graphical representation of the goals, objectives, resources, activities and anticipated outcomes of a program. It is normally displayed on one page and is used to assist with both the understanding and evaluation of programs.

First Nation communities. At the time that the logic models were created, nursing and professional health services (and other social program) were provided to the participating First Nation communities through the Prince Albert Grand Council and Bands provided para-professional health services.<sup>2</sup> Therefore, a level of autonomy exists around program design and spending for program managers at the local level. At this point in the process program information was collected at the Prince Albert Grand Council level (second level<sup>3</sup>) and later verified at the community level.

Program data was first collected through an examination of secondary data, or currently existing documentation, related to the Health, Social Development, Education, Justice and Economic Development programs. Second level service managers, who oversee the delivery of programs to the community, were contacted to inform them of the project and request program documentation. Materials such as organization charts, annual reports, program manuals, publications and pamphlets, work plans and daily activity logs were examined and from them the goals, resources, activities, and short- and long-term objectives of the programs were determined.

Unstructured interviews were held with second-level program managers to clarify and confirm our understanding of the programs. Drafts of the logic models were then returned to these managers who were asked to provide feedback to ensure they accurately reflected the programs. Revisions were made and a final set of logic models was created of all the programs that were delivered in each of the communities. A set of generic logic models, without community variation, was provided to the First Nation research partners; Prince Albert Grand Council (PAGC) the Athabasca Health Authority (AHA) and Northern Inter-Tribal Health Authority (NITHA).

In interviews with community Health Directors, the generic logic models were reviewed and revised to create a set of community-specific logic models, which included variations in program functioning specific to individual communities. Each community was provided with their set of logic models, along with a summary sheet highlighting program delivery information specific to their community.

---

<sup>2</sup> During the time that the study was conducted, the newly formed Athabasca Health Authority began to provide nursing and professional health services to the two First Nation communities (Fond du Lac, Black Lake) and provided all health services to the provincial communities of Stony Rapids, Camsell Portage and Uranium City. The two Bands continue to provide para-professional health services in these First Nation communities.

<sup>3</sup> First level services are those delivered at the community level by community-based staff; second level services refer to the overall management of programs provided by the Prince Albert Grand Council to member communities.

A list of the programs that logic models were developed for is attached as Appendix D; Appendix E lists the source documents upon which the logic models were created. A set of generic logic models is included as Appendix F.

### **Key Informant Interviews with Health Directors**

Phase I of the research strategy also involved collecting data from Health Directors in the six First Nation communities. Interview questions were developed by the research team (see Appendix G) and researchers travelled to the communities to conduct the interviews.

Part A of the interview questionnaire was designed to discover the major health issues within communities; how the concepts community wellness and community health are understood; how the concept of community capacity is understood and how it is seen to relate to community health; and to determine which domains of community health and capacity currently defined in the literature are relevant to First Nation communities, and if any new domains exist. Part B of the interview questions related to the logic models, which were reviewed and revised by Health Directors to reflect program delivery at the community level. Questions also addressed how the programs were seen to contribute to community health and capacity. Parts A and B were separated into two interview sessions.

Interview data were transcribed verbatim and the transcripts were mailed back to the participants for review and release. Transcripts were then revised if required, and analyzed using a grounded theory approach (Charmaz, 2000). Using a grounded theory approach means that interpretations are grounded in the experiences of those being interviewed, with the researcher consciously limiting preconceived notions about what the data might or should say. Grounded theory is especially useful in uncovering unanticipated themes and relationships. Grounded theory begins with assigning codes to text segments and initiates the interpretation or creation of themes. Coding can be done line-by-line or in blocks of text (Charmaz, 2000). Coding for this project was done in blocks of text in order to retain the context in which comments were made. A qualitative data analysis software package, Atlas.ti (versions 4.2 and 5.0) was used to support data management and analysis. Atlas.ti is a widely used program based on grounded theory (Barry, 1998) and is especially useful for managing the coding, analysis, and dissemination processes.

A preliminary analysis was completed for each community interview, beginning with the themes introduced by interview participants followed by themes drawn from the interview schedule. These summaries were then combined into one analytical document. From the

combined interview data, we created a draft framework, consisting of two diagrams that captured participant perspectives on the concepts of community health/wellness and capacity.

It was important that the framework be validated by the community-based Health Directors prior to presenting them at community focus groups, so a meeting was held to review the initial draft framework. From the feedback received at this meeting, revisions were made to the framework and a second meeting was held with Health Directors to approve this version.

Appendix H contains the final draft evaluative indicators framework created for presentation to the focus groups:

Diagram 1 – Concepts of Community Health and Community Wellness

Diagram 2 – Key Domains of Community Health and Community Wellness

### **Focus Groups with Community Members**

Focus groups were held in each of the First Nation research communities as well as in the three provincial communities of Stony Rapids, Uranium City and Camsell Portage. In each instance community representatives (Health Directors in the First Nations communities) were contacted to assist with identifying participants and organizing the focus group meeting.

A total of 59 community members took part in ten (10) focus groups, with the number of participants in each ranging from a minimum of two to a maximum of ten (see Table 1).

**Table 1**  
**Focus Group Participants**

Community Focus Groups	Participants N=59
Stony Rapids (AHA)	10
Stony Rapids (community)	7
Uranium City	3
Camsell Portage	4
Fond du Lac	9
Black Lake	8
Hatchet Lake	7
Cumberland House	5
Red Earth	3
Wahpeton	3
<b>Totals:</b>	<b>59</b>

Focus group participants were presented with the draft evaluative framework and were asked to respond with their views of community health and wellness (focus group questions are in Appendix I). Participants were also asked to express these views as additions or deletions to draft framework. As part of the discussion on each domain and issue, community-relevant indicators were often suggested by participants.

Focus group participants were also asked to comment on the presentation of the framework, and for their suggestions for appropriate graphics to use.

Interview data were transcribed verbatim and the transcripts were mailed back to the participants for review and release. Each participant was asked to edit only their comments, and not those of others in the group. Transcripts were then revised if required, and analyzed, again using a grounded theory approach.

Coding of the focus group data was done in blocks of text in order to retain the context in which comments were made. Each community's focus group transcript was analyzed for additions or deletions to the community health and capacity domains, and for new issues and indicators. A table listing the revisions was created for each community. From the tables, community-specific framework diagrams were created and returned to each community. A second level of analysis created a general framework which incorporated the domains, issues, and indicators common to all communities.

## c. Development of Community Health Framework & Indicators

Development of the comprehensive community health and wellness indicators framework began with reviewing each domain description and making any necessary revisions to ensure each one reflected the community definition of the domain. A set of indicator categories was then identified within each of the domains, and issues and indicators related to each area, as described by participants, were summarized. The next step was to search for existing data sources that would potentially be available at the community level. The components of the community health indicators framework are *domain*, *indicator categories*, *identified issues*, *community-proposed indicators* and *existing data sources*, as illustrated in Table 2, using Healthy Lifestyles (Self-Care) as an example.

**Table 2  
Community Health Indicators Framework – Components**

Domain	Indicator Categories	Identified Issues	Community-proposed Indicators	Existing Data Sources
Healthy Lifestyles	Self-care	Healthy eating		RHS Adult/Adolescent/Child Survey – Questions 59/29/50 Health Canada 2003 Nutrition Survey – Questions 21 & 22
		Healthy socializing		
		Healthy self-image	girls saying no to sex	
		Medical treatment	taking medication as prescribed	no indicator source (confidentiality issues)
			attendance at support groups	local survey of health and social agencies offering support groups
			# of medical appointments kept/missed	no indicator source (confidentiality issues)
			comfort with disclosing health issues	no indicator source
		Healthy home	keeping regular bedtime hours	no indicator source
			limiting TV/video game use	RHS Child/Adolescent Survey – Questions 57& 69
		Hygiene		
	Participation	Social activities		
		Physical activities		
		Elders & youth		
		Programming		
	Motivation	Promotion		
		Environmental conditions		
		Affordability		
		Early engagement		
		Nutrition/fitness awareness		

To create the toolkit for use at the community level, the information above was revised into a more user-friendly format and organized in a binder for easy reference. The web addresses of possible data sources were identified and referenced in the toolkit. Due to the fact that web addresses can change without notice, we have sometimes referenced the web source at the source level (i.e. Statistics Canada specific survey) rather than at the document level. A student from the Indian Communication Arts Program at First Nations University created a stylized community health and wellness indicators framework diagram, incorporating the appropriate colours and shapes identified by our partners and community participants (see Appendix J). An example of the user friendly format in the toolkit is provided in Appendix K, where Indicator # 27 from the Services and Infrastructure domain, Service Delivery indicator category is presented.

## D. Pilot Testing the Framework & Indicators

The toolkit was piloted to test the framework design, format, and layout, and to assess the availability of indicator data at the community level. A pilot community was selected at the September 20, 2004 project meeting with community Health Directors. The choice of community was primarily based on the availability of indicator data from Statistics Canada for the community; due to in part to its size and its participation in recent surveys. A university research team member travelled to the community and worked with a community member to review the framework and the toolkit, and search for data on selected indicators. Additionally, in April 2005 the draft Community Health Indicators Framework was presented to the health director in the pilot community, community representatives, and representatives from the Athabasca Health Authority, for their review and comments. The experience of conducting the pilot and the feedback received from the pilot community was incorporated into the final revision of the tool kit. A second phase of the project, which would see the implementation of the toolkit in participating communities, is planned.

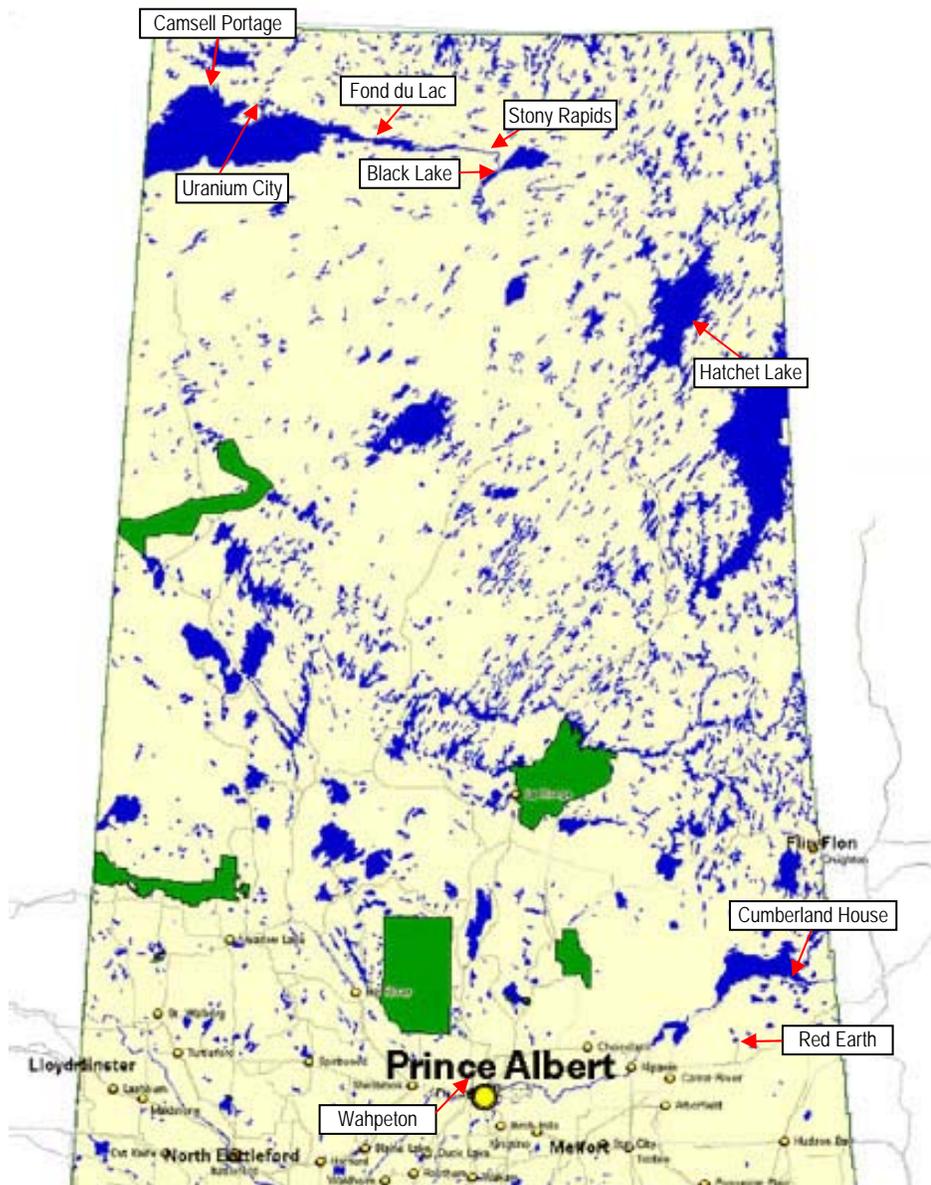
## References

Barry, C.A. (1998). Choosing qualitative data analysis software: Atlas/ti and Nudist compared. *Sociological Research Online*, 3. (Available at: <http://www.socresonline.org.uk/socresonline/3/3/4.html>)

Charmaz, Kathy. (2000). "Grounded Theory: Objectivist and Constructivist Methods", in Norman K. Denzin and Yvonne S. Lincoln (Eds.). *Handbook of Qualitative Research*. Thousand Oaks, California: Sage Productions. 509-53

## APPENDICES

**Communities Participating in the  
First Nation's Health Development Project**



Northern Saskatchewan

## MEMORANDUM OF AGREEMENT TO PARTICIPATE

**Project Title:**       **First Nation's Health Development:  
Tools for Program Planning and Evaluation**

The purpose of this memorandum is to provide the terms under which each community agrees to participate in the above project. The memorandum outlines the assistance provided by the community contact person and the products the researchers will return to the community.

For the purposes of this project, the community contact will be the Health Director in each First Nation community and the local leadership (or designate) in the provincial communities in the Athabasca region.

**Primary Research Team:**     Dr. Bonnie Jeffery, University of Regina  
   Dr. Sylvia Abonyi, University of Regina  
   Colleen Hamilton, Project Coordinator  
   Shawn Ahenakew, Project Assistant  
   Ernie Sauve, Prince Albert Grand Council  
   Anne Unsworth, Prince Albert Grand Council  
   Georgina MacDonald, Athabasca Health Authority  
   Lionel Bird, Northern Inter Tribal Health Authority

**The community contact agrees to:**

- Assist the researchers with setting up meetings to interview key informants in the community
- Assist the researchers with setting up focus groups with Health Committee members and with community members
- Assist the researchers in identifying a community member who will be hired and trained to conduct interviews and assist with focus groups in the community
- Provide advice to the researchers on the appropriate methods of involving their community in this project
- Participate in periodic research team meetings to review the deliverables developed throughout the project
- Review information specific to their community to ensure that it accurately reflects their program information

**The researchers agree to:**

- Provide a document reviewing the literature in the area of Aboriginal health and capacity building
- Hire and provide training for any community members who may be selected to assist with interviews and focus groups
- Provide community specific models of each program delivered in the community that relate to health
- Provide a copy of the deliverables for review and comments
- Provide a manual suggesting the types of information that could be collected to assist with program planning and evaluation
- Provide ongoing updates on the project work through access to a web-site Where accessing a web-site is difficult, a CD-ROM of all the information will be provided at regular intervals
- At all times, the researchers will maintain confidentiality of information gathered from individual interviews and community focus groups

This document describes the terms of reference for community agreement to participate in this project. Individual informed written consent will be obtained from those who agree to participate in the interviews and focus groups.

This memorandum will be reviewed periodically throughout the project to ensure that the project is being conducted in an appropriate manner in each community. Additional points may be added throughout the duration of the project.

\_\_\_\_\_  
Chief

\_\_\_\_\_  
Date

\_\_\_\_\_  
Health Portfolio Councillor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Health Director

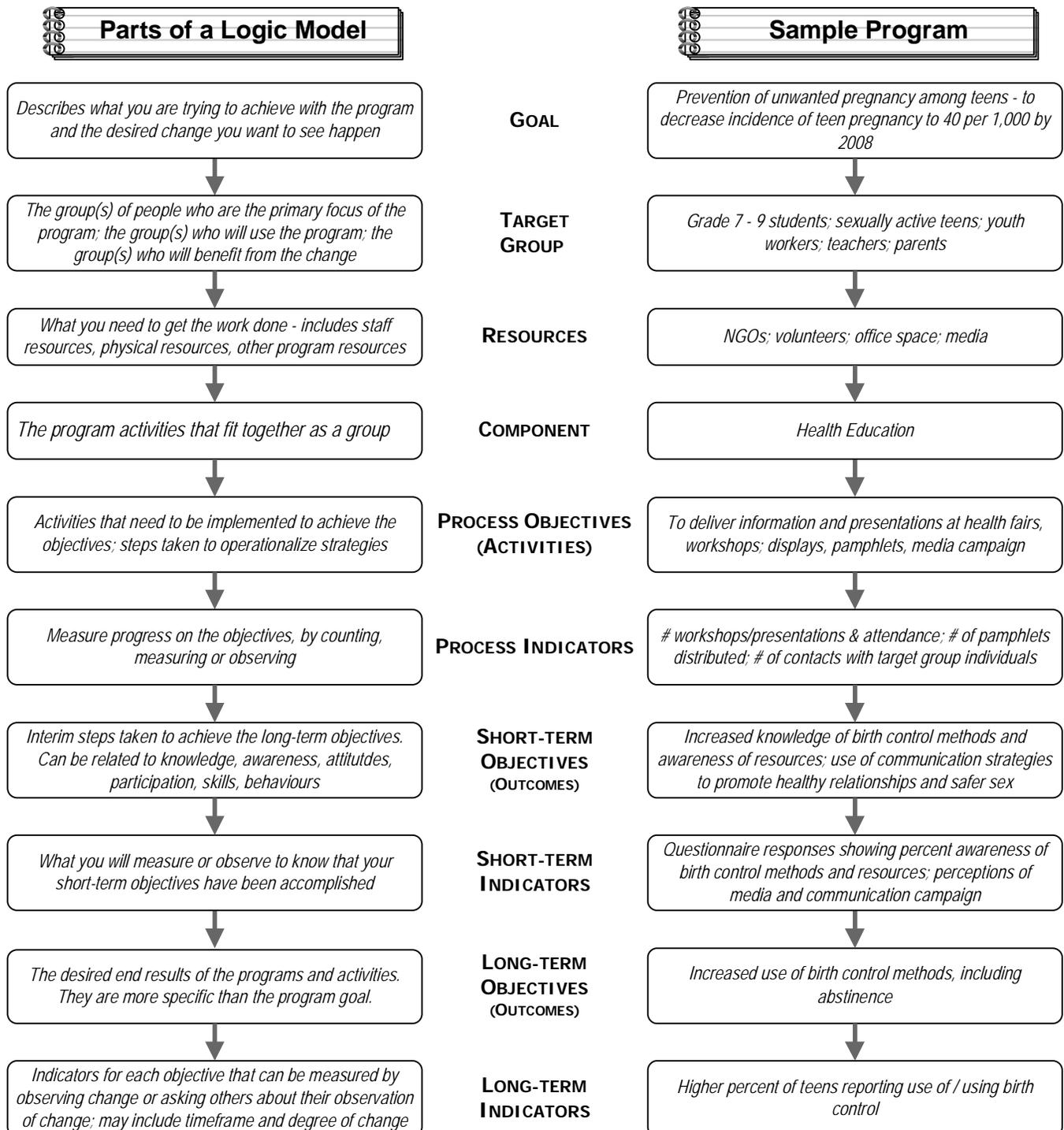
\_\_\_\_\_  
Date

\_\_\_\_\_  
Bonnie Jeffery  
On behalf of the research team

\_\_\_\_\_  
Date

## What is a Logic Model?

- ♦ A tool used to describe and understand the overall structure and function of a program or service
- ♦ Describes how a program **ideally** should function, based on the program theory and goals
- ♦ Depicts relationships between the main activities or components of a program and its associated goals, objectives, outcomes and resources
- ♦ Can be used as a communication tool to describe a program or service to stakeholders, funders and program staff
- ♦ Can be used to assist in program planning and evaluation by:
  - illustrating the link between activities and outcomes
  - identifying differences between how the program should work and how it presently operates



## PAGC Program Logic Models

Health	Social Development	Education	Justice	Economic Development
Nursing	Brighter Futures	Sports, Culture & Recreation	Justice Program	Community Internet Access
Addictions	Daycare			
Environmental Health	Head Start			
Holistic Health				
Health Promotion				
Diabetes				
Home & Community Care				
Dental Therapy				
Sexual Wellness				
Canadian Prenatal Nutrition Program (CPNP)				

### Research Communities:

Prince Albert Grand Council:

Wahpeton Dakota First Nation  
 Cumberland House Cree Nation  
 Red Earth Cree Nation

Athabasca Health Authority:

Hatchet Lake Denesuline Nation  
 Black Lake Denesuline Nation  
 Fond du Lac Denesuline Nation

Provincial:

Stony Rapids  
 Uranium City  
 Camsell Portage

## Logic Model Source Documents

Program	Documents
<b>Brighter Futures</b>	<ul style="list-style-type: none"> <li>● PAGC Brighter Futures documents: coordinator job description; Community Based Funding Package Executive Summary; Annual Workplan – April 1, 1999 to March 31, 2000</li> <li>● PAGC Annual Report – 2001-2002</li> </ul>
<b>Home and Community Care</b>	<ul style="list-style-type: none"> <li>● Health Canada, 2000 – First Nations and Inuit Home and Community Care Planning Resource Kit – <b>Service Delivery Plan 3A</b>. <a href="http://www.hc-sc.gc.ca/msb">www.hc-sc.gc.ca/msb</a></li> <li>● Prince Albert Grand Council Health and Social Development – Nursing Program Workplan – April 1, 2002 to March 31, 2003</li> <li>● Paskawawaskikh First Nation Home &amp; Community Care Service Delivery Plan, April 2001</li> </ul>
<b>Justice Program</b>	<ul style="list-style-type: none"> <li>● PAGC Annual Report – 2001-2002</li> <li>● PAGC Justice Program and Services document</li> </ul>
<b>Headstart</b>	<ul style="list-style-type: none"> <li>● PAGC – Aboriginal Headstart Proposal and Budget 2000-2001, 2001-2002</li> <li>● Health Canada Website – First Nations Head Start On Reserve <a href="http://www.hc-sc.gc.ca/fnihb-dgspni/fnihb/cp/fnhisor/introduction.htm">www.hc-sc.gc.ca/fnihb-dgspni/fnihb/cp/fnhisor/introduction.htm</a></li> <li>● Health Canada Website – Population and Public Health Branch, Alberta/NWT Program/Project Info – Aboriginal Head Start <a href="http://www.hc-sc.gc.ca/hppb/regions/ab-nwt/program/e_ahs.html">www.hc-sc.gc.ca/hppb/regions/ab-nwt/program/e_ahs.html</a></li> </ul>
<b>Daycare</b>	<ul style="list-style-type: none"> <li>● PAGC Daycare Package – July 2001, Section 4 – Quality Care</li> <li>● Prince Albert Grand Council Health and Social Development – Daycare Workplan – April 1, 2001 to March 31, 2002</li> <li>● PAGC Monthly Activity Reports from community daycares (Fond du Lac, Red Earth, Wahpeton,</li> </ul>
<b>Sexual Wellness</b>	<ul style="list-style-type: none"> <li>● Prince Albert Grand Council Health and Social Development – Sexual Wellness Workplan – April 1, 2002 to March 31, 2003</li> <li>● Prince Albert Grand Council CSHA (Canadian Strategy for HIV/AIDS) Proposal – April 2001 to March 2002</li> </ul>
<b>Canadian Prenatal Nutrition Program (CPNP)</b>	<ul style="list-style-type: none"> <li>● Prince Albert Grand Council Health and Social Development-Canada Prenatal Nutrition Program Proposal Submission Worksheet</li> <li>● Prince Albert Grand Council Health and Social Development Programs and Services</li> <li>● CPNP First Nations and Inuit Component – National Framework for Program Expansion 1999/2000 – April, 2000</li> <li>● Health Canada website – Population and Public Health Branch, Alberta/NWT Region Project Info – Canada Prenatal Nutrition Program <a href="http://www.hc-sc.gc.ca/hppb/regions/ab-nwt/program/e_cnpn.html">www.hc-sc.gc.ca/hppb/regions/ab-nwt/program/e_cnpn.html</a></li> </ul>
<b>Diabetes</b>	<ul style="list-style-type: none"> <li>● Prince Albert Grand Council Health and Social Development Services Brochure</li> <li>● Handout: Appendix A Goal for Continuation of the project in order of priority</li> <li>● Handout: Saskatchewan Region Aboriginal Diabetes Initiative-On Reserve Programming and Financial Report for 2000/2001 (6 pages-work plan)</li> </ul>

Program	Documents
	<ul style="list-style-type: none"> <li>• Community Health work plans (Health Transfer Communities)</li> <li>• Health Canada Website – Aboriginal Diabetes Initiative: First Nations and Inuit in Inuit Communities Program. www.hc-sc.gc.ca/fnihb-dgspni/fni...cations/onreserve_program_framework.htm</li> <li>• Diabetes Education Program Timeline April 2001-March 2002</li> <li>• Prince Albert Grand Council Job Description: Community Diabetes Nurse Educator</li> <li>• PAGC document: Duties/Responsibilities: Diabetes Program Assistant</li> </ul>
<b>Education</b>	<ul style="list-style-type: none"> <li>• meeting with Education program manager – information on non-academic (i.e. social) programs offered through the schools in the communities is only available in the communities</li> <li>• provided with a list of contacts – education coordinators and principals</li> </ul>
<b>Community Internet Access</b>	<ul style="list-style-type: none"> <li>• telephone interview with Information Technology Manager</li> </ul>
<b>Dental Therapy</b>	<ul style="list-style-type: none"> <li>• Prince Albert Grand Council Programs and Services Brochure</li> <li>• Prince Albert Grand Council – Health Social Development Dental therapy Program Work Plan. April 1, 2002 – March 31, 2003.</li> <li>• PAGC Annual Report – 2001-2002</li> <li>• Prince Albert Grand Council-Health and Social Development Community Work Plans</li> <li>• Prince Albert Grand Council Job Description: Senior Dental therapist/Dental Therapist</li> </ul>
<b>Sports, Culture &amp; Recreation</b>	<ul style="list-style-type: none"> <li>• PAGC Annual Report –2001-2002</li> <li>• Technical Manual: Saskatchewan First Nation Winter and Summer Games.</li> <li>• Prince Albert Grand Council Sports, Culture and Recreation Association Policies and Procedures Manual</li> </ul>

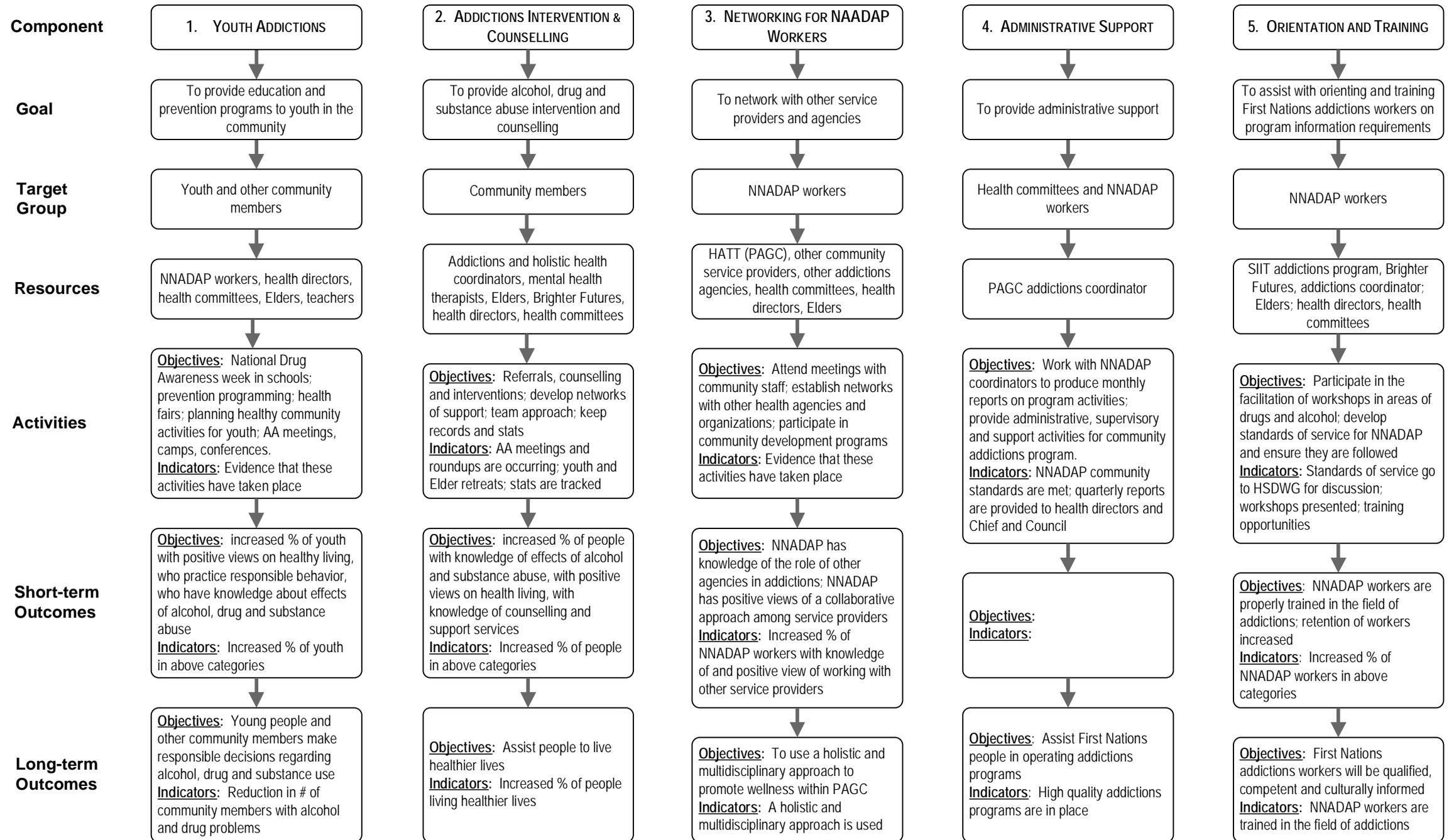
updated 5-Feb-03

## Appendix F

### Generic Logic Models

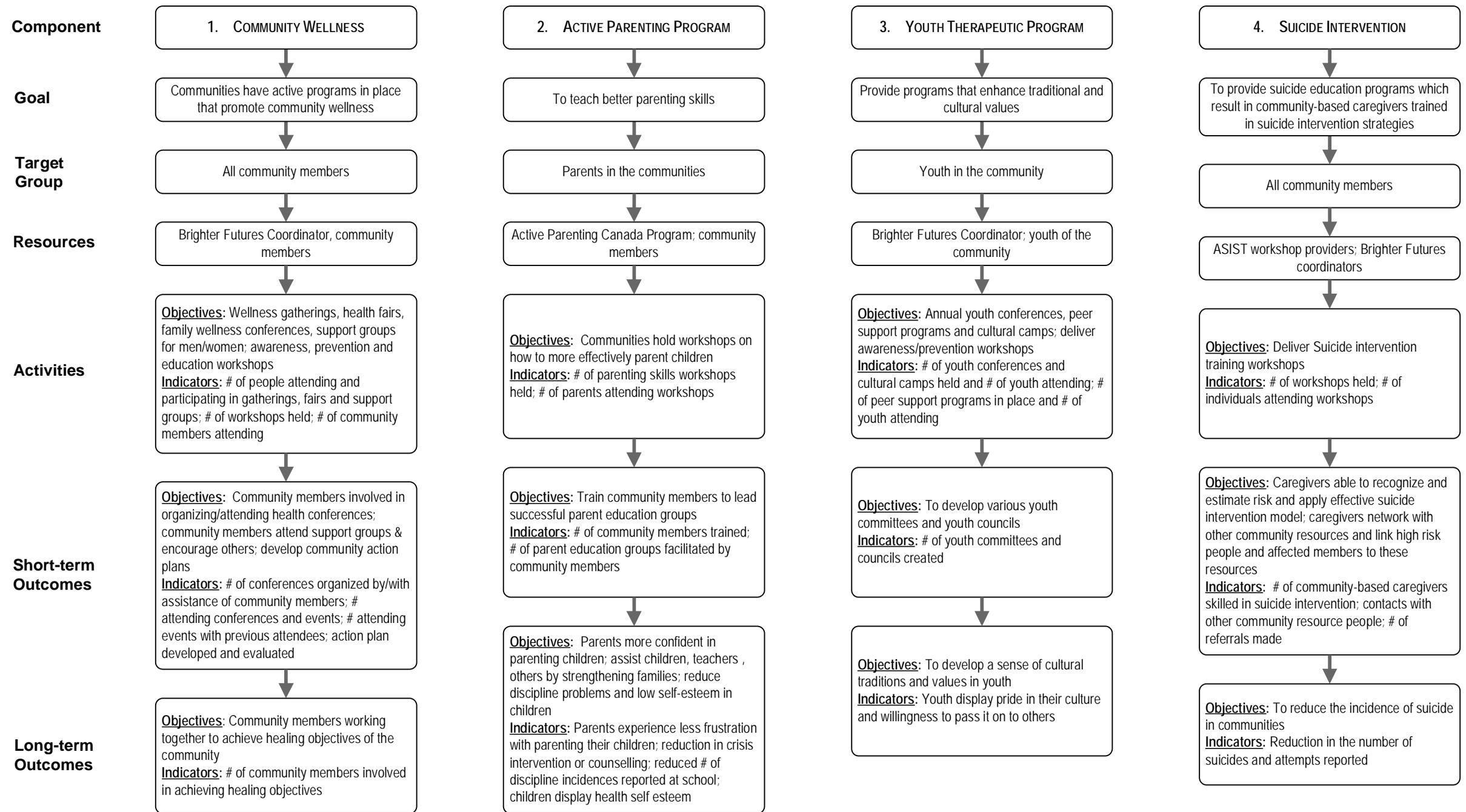
# Addictions

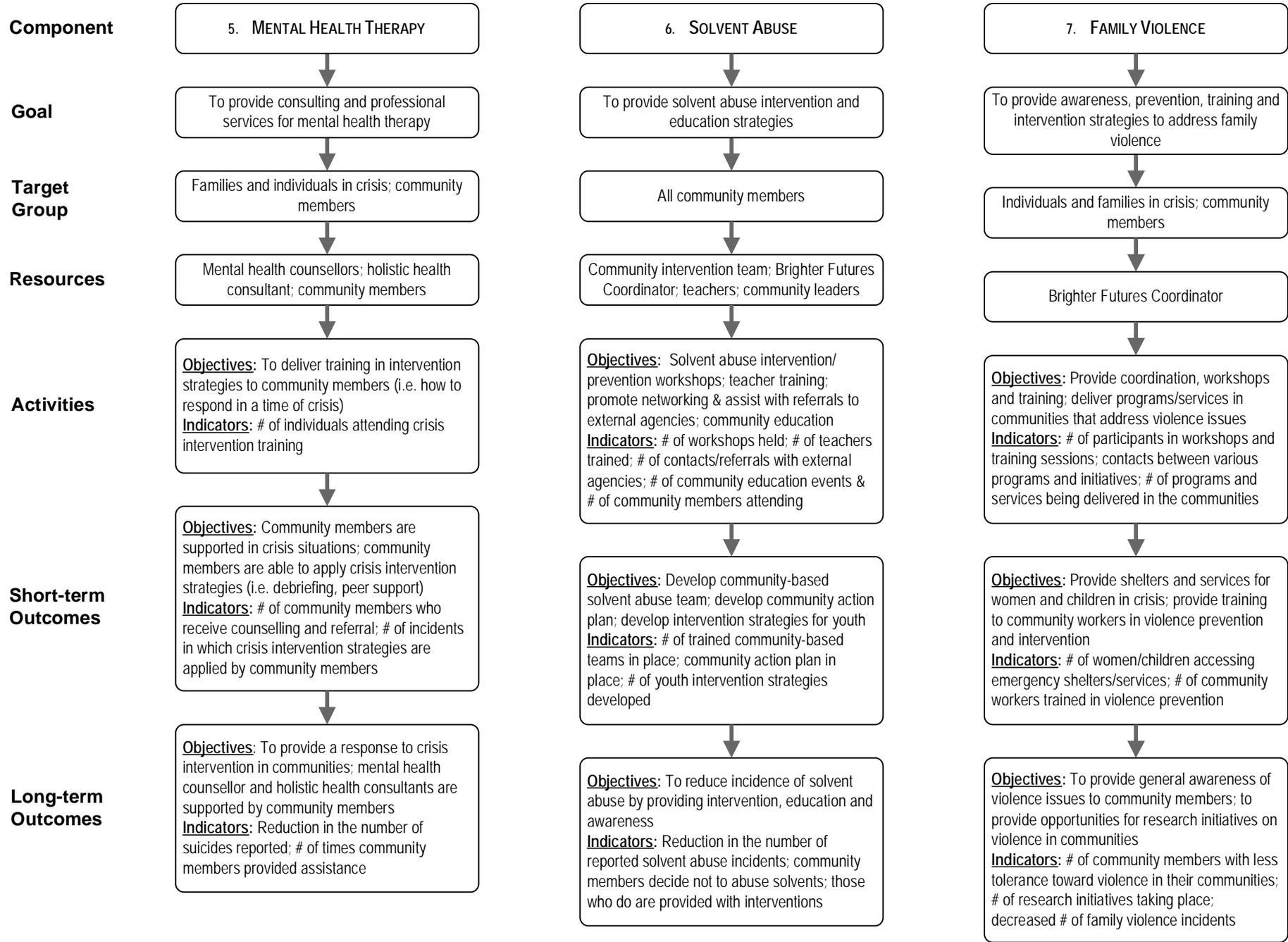
To support First Nations people and their communities in establishing operating programs aimed at arresting and offsetting high levels of alcohol, other drugs and substance abuse among the target population living on reserves.



# Brighter Futures

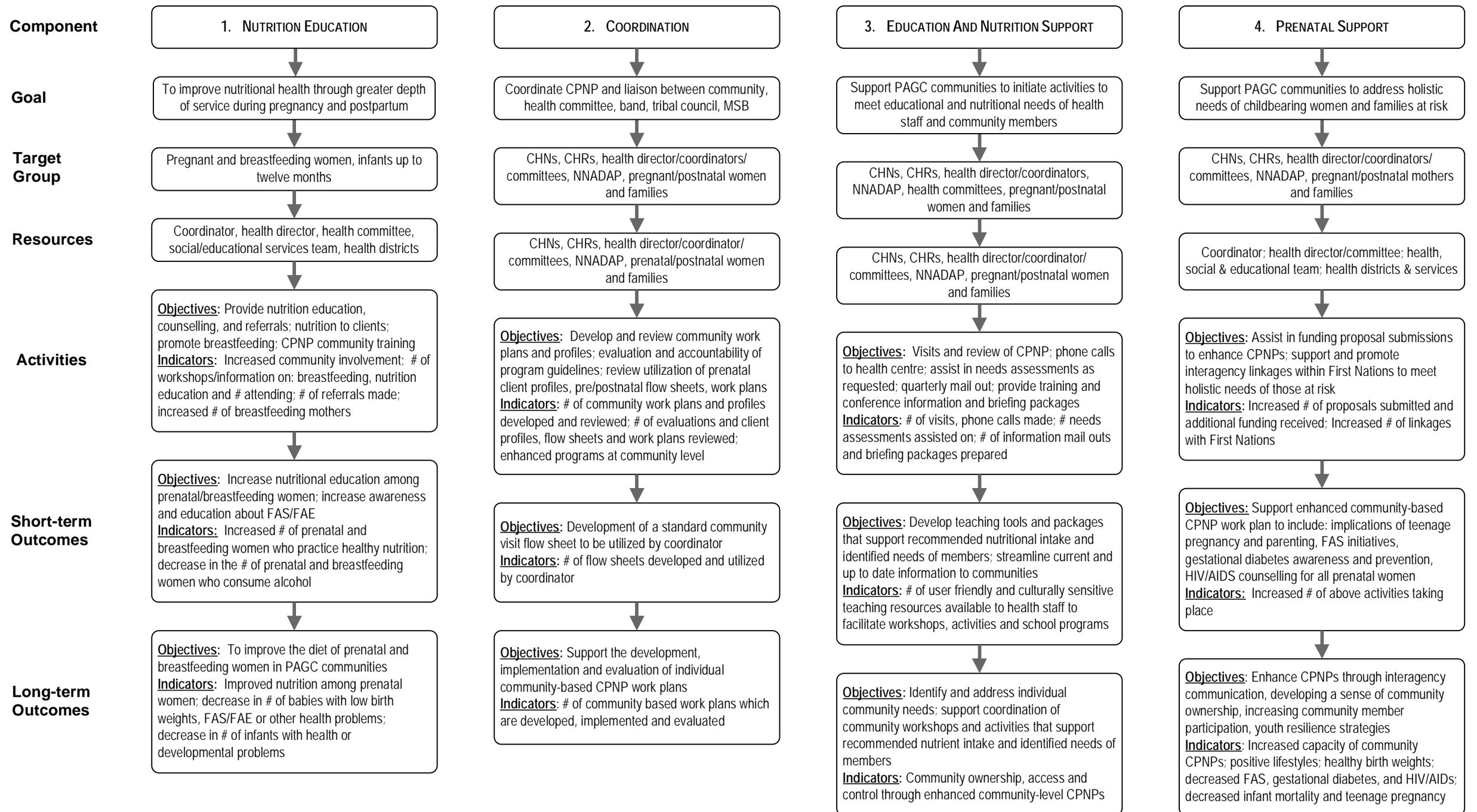
To manage the Brighter Futures, Building Health Communities and Family Violence initiatives contained within the community-based funding package. To ensure that program strategic elements include the restoration of traditional and cultural values, concept of healing, human resource development, provision of training and development of culturally appropriate prevention/postvention strategies, and to establish intervention resource capabilities.





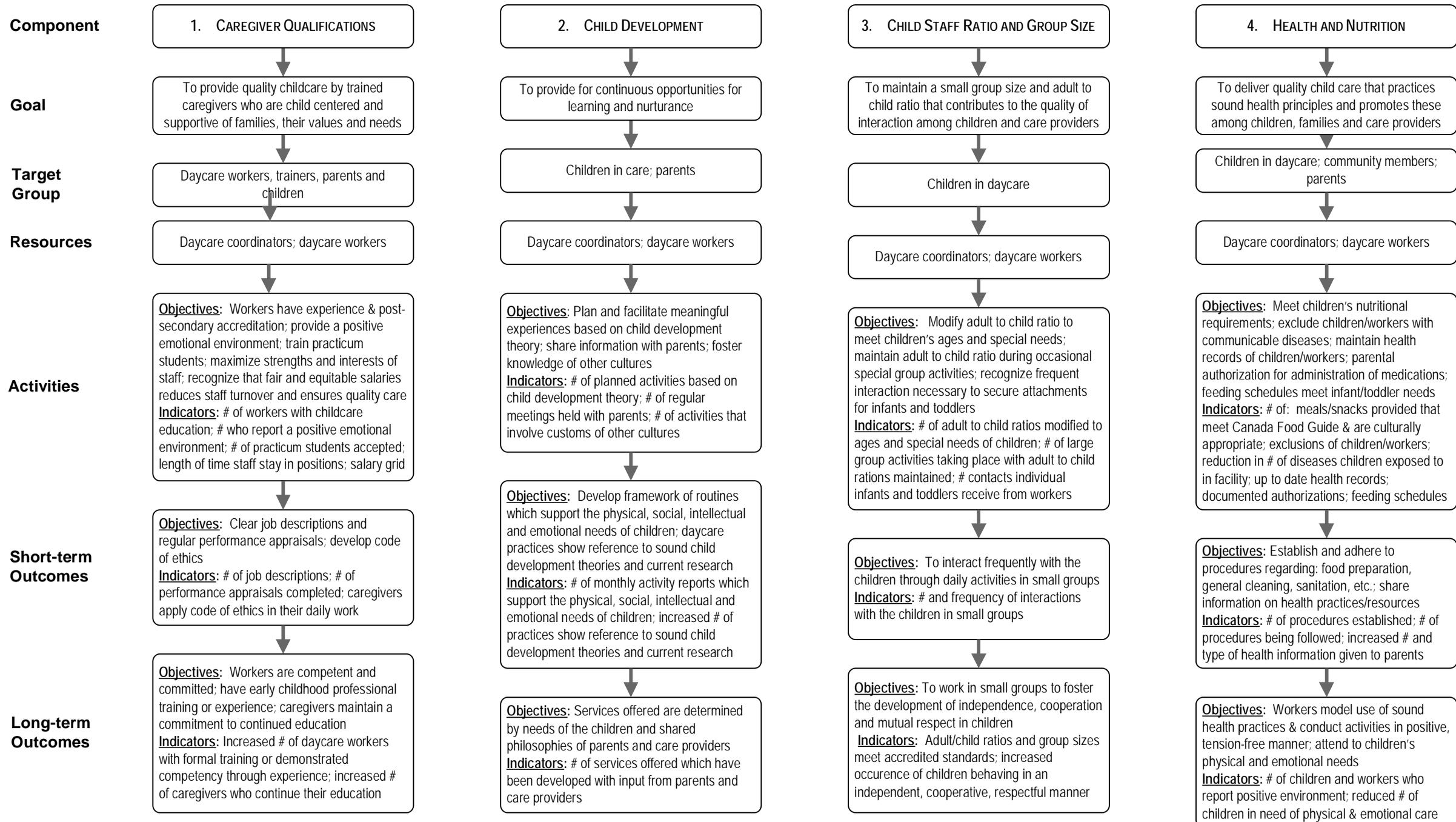
# CPNP - Canada Prenatal Nutrition Program

To provide maternal infant and nutritional health by providing a greater depth of service to women earlier in their pregnancy and for a longer duration postpartum.

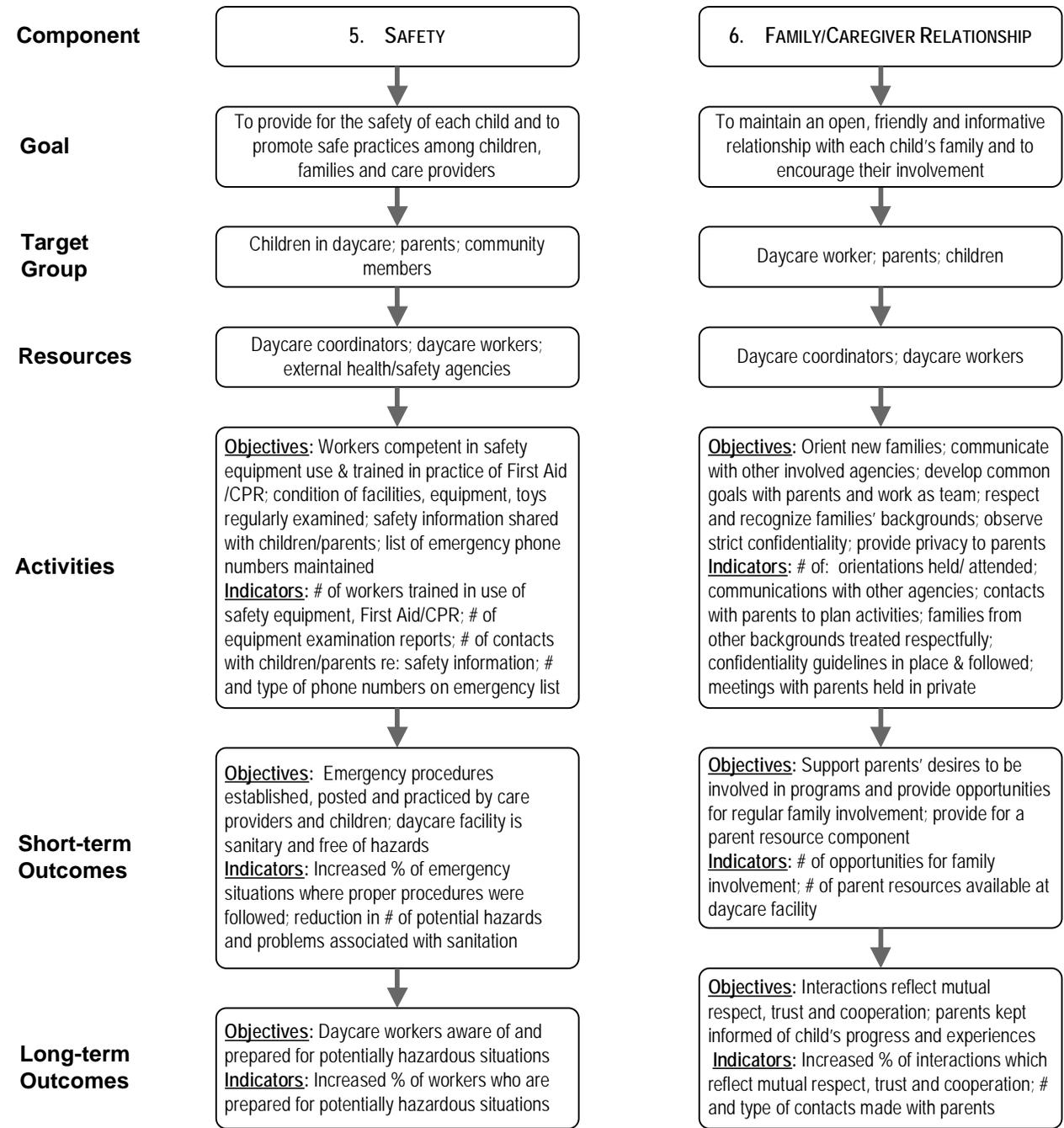


# Daycare

To provide quality community daycare which provides a healthy, safe environment; that promotes cultural and traditional teachings; which meets children's long and short term physical, emotional, cognitive and spiritual developments and needs.

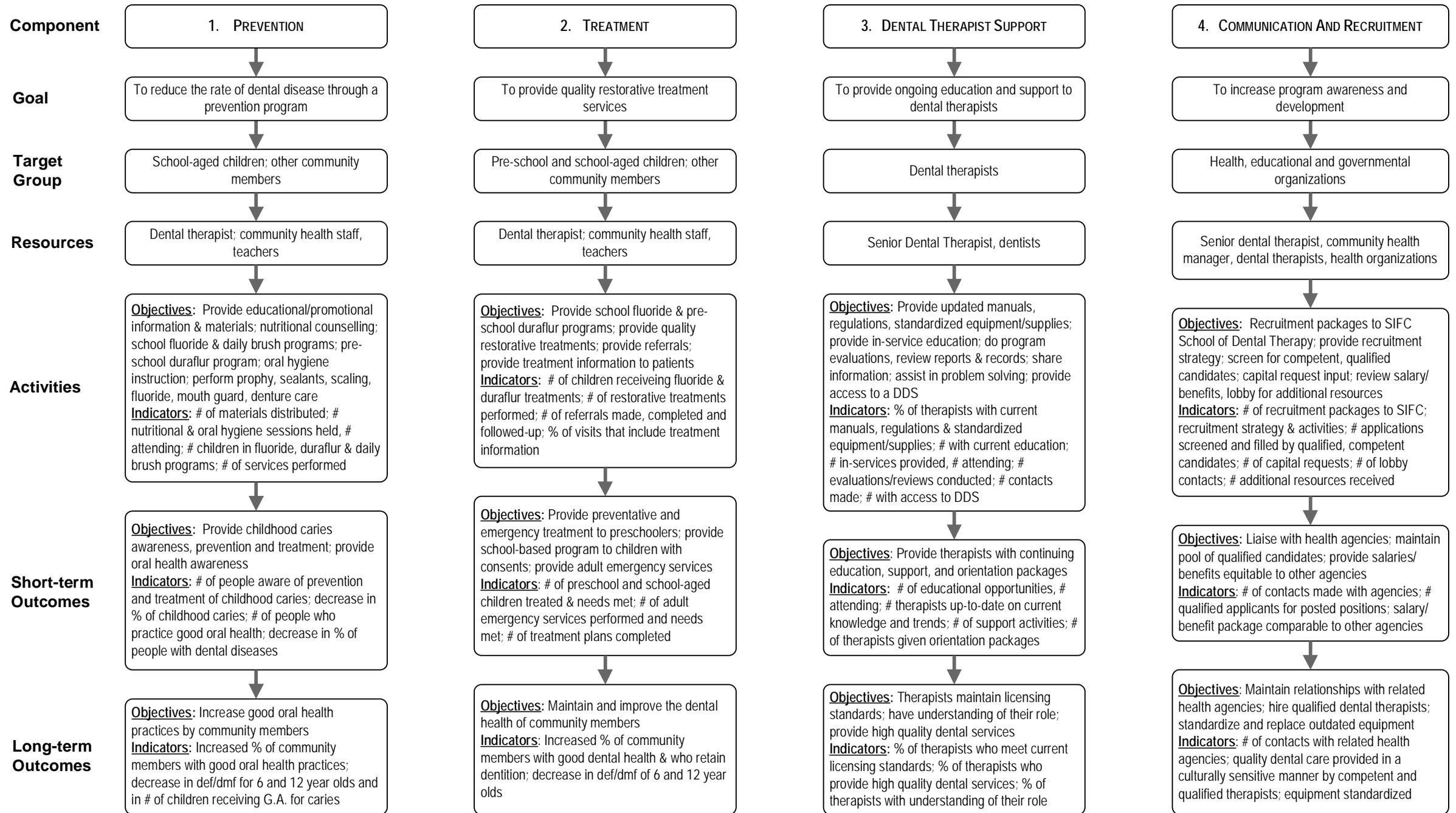


# Daycare



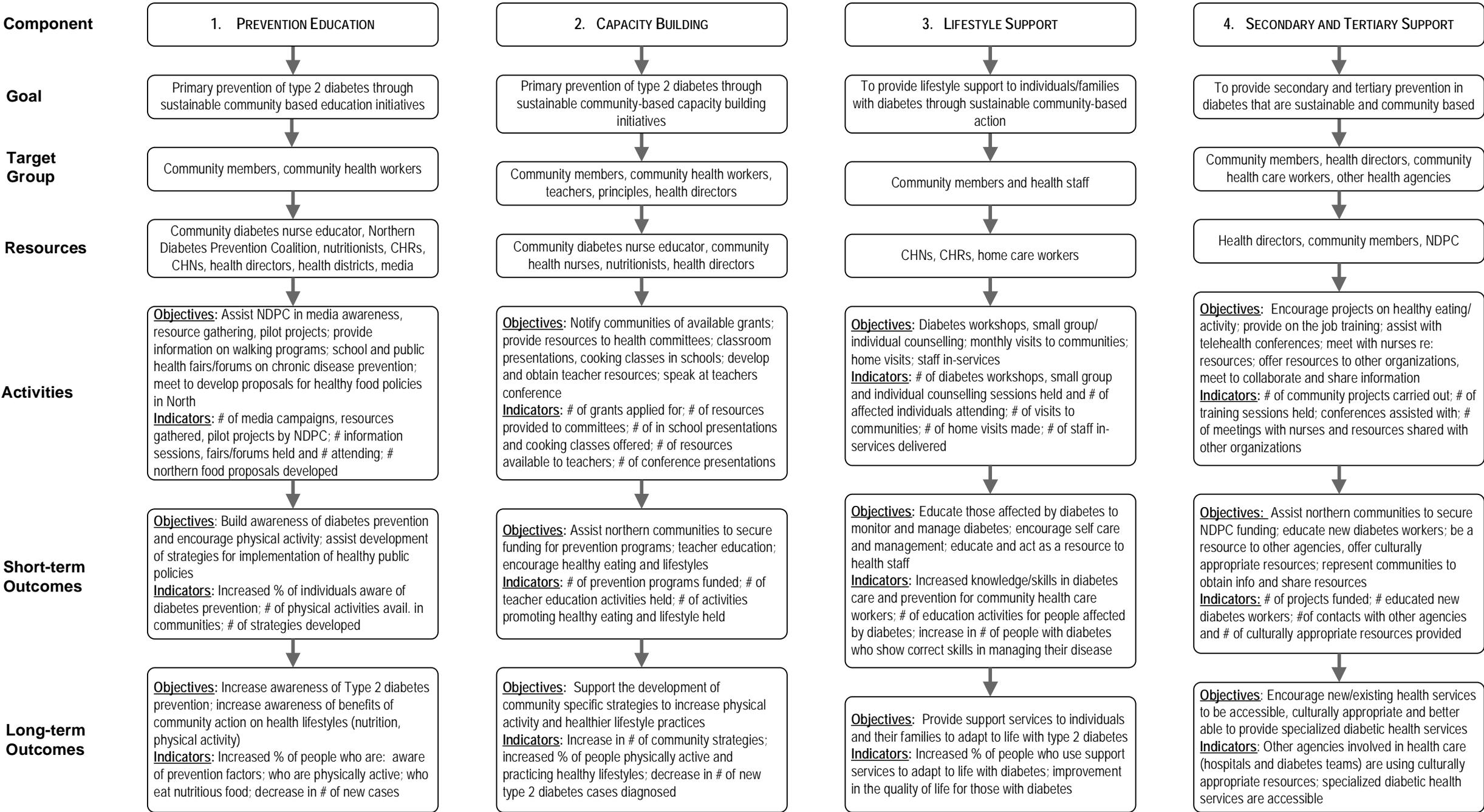
# Dental Therapy

To assist on-reserve First Nations people in achieving optimal dental health.



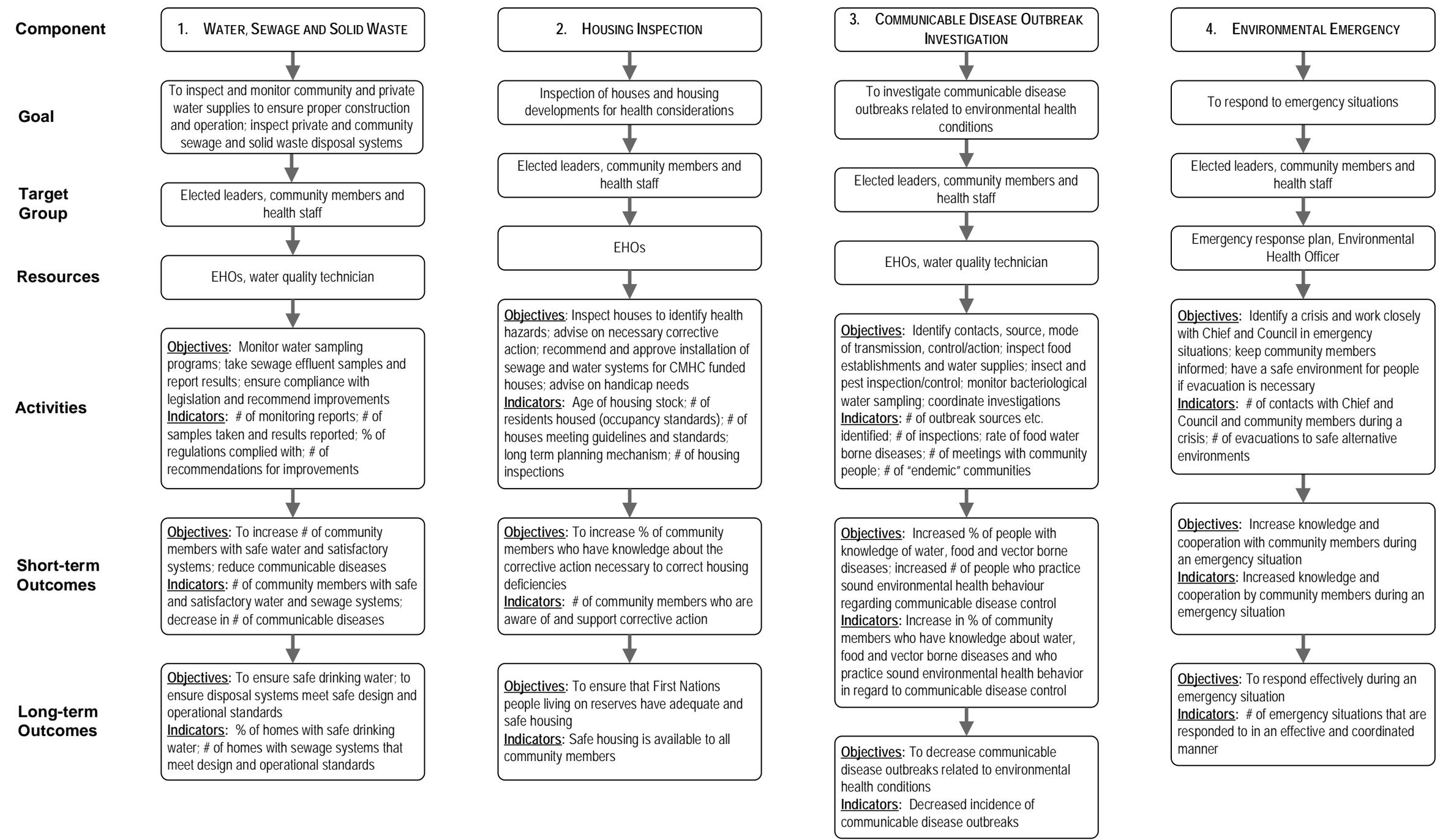
# Diabetes

Primary prevention of Type 2 diabetes through sustainable, community-based action on-reserve.

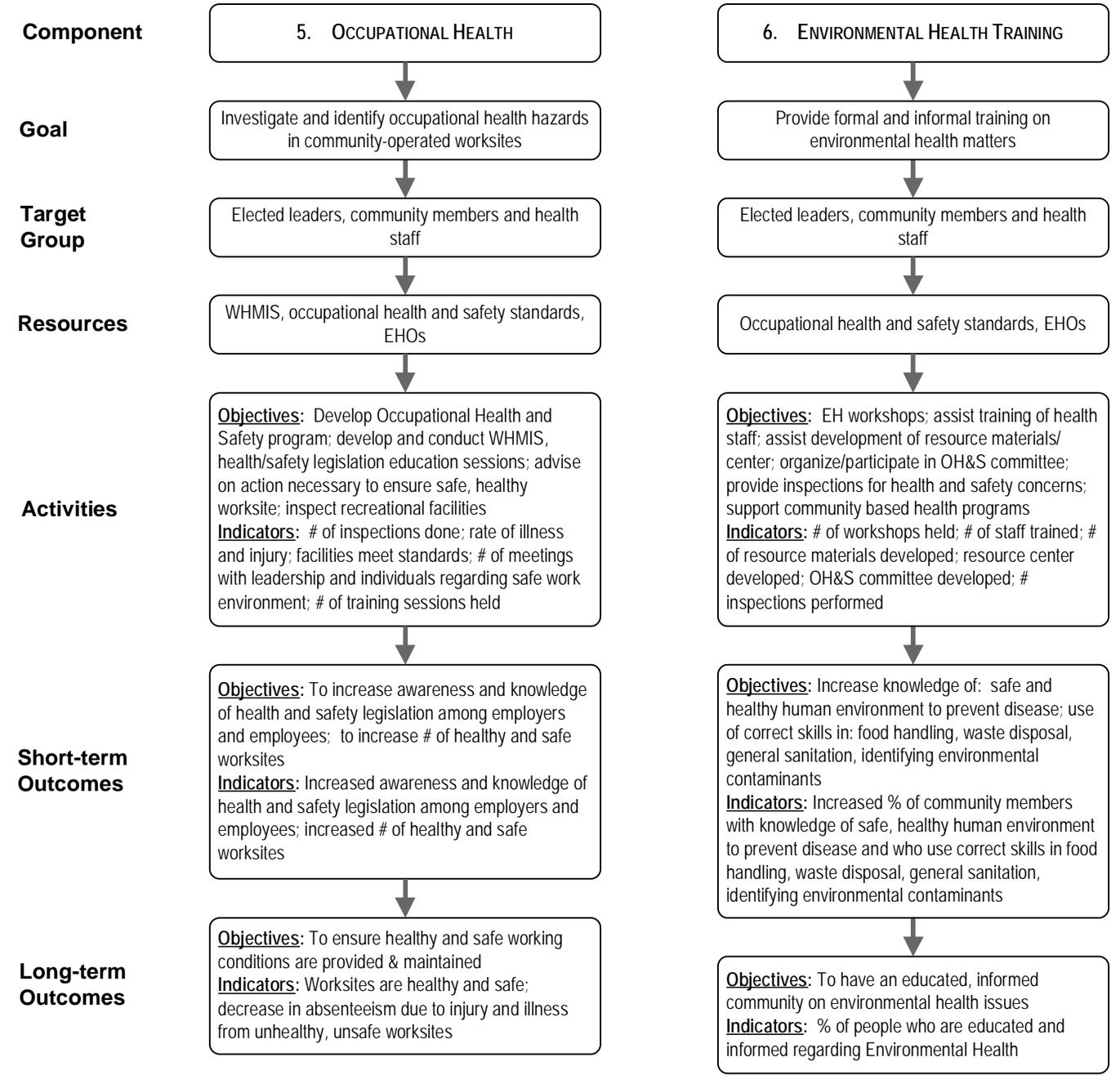


# Environmental Health

Disease prevention through the maintenance of a safe and healthful human environment.

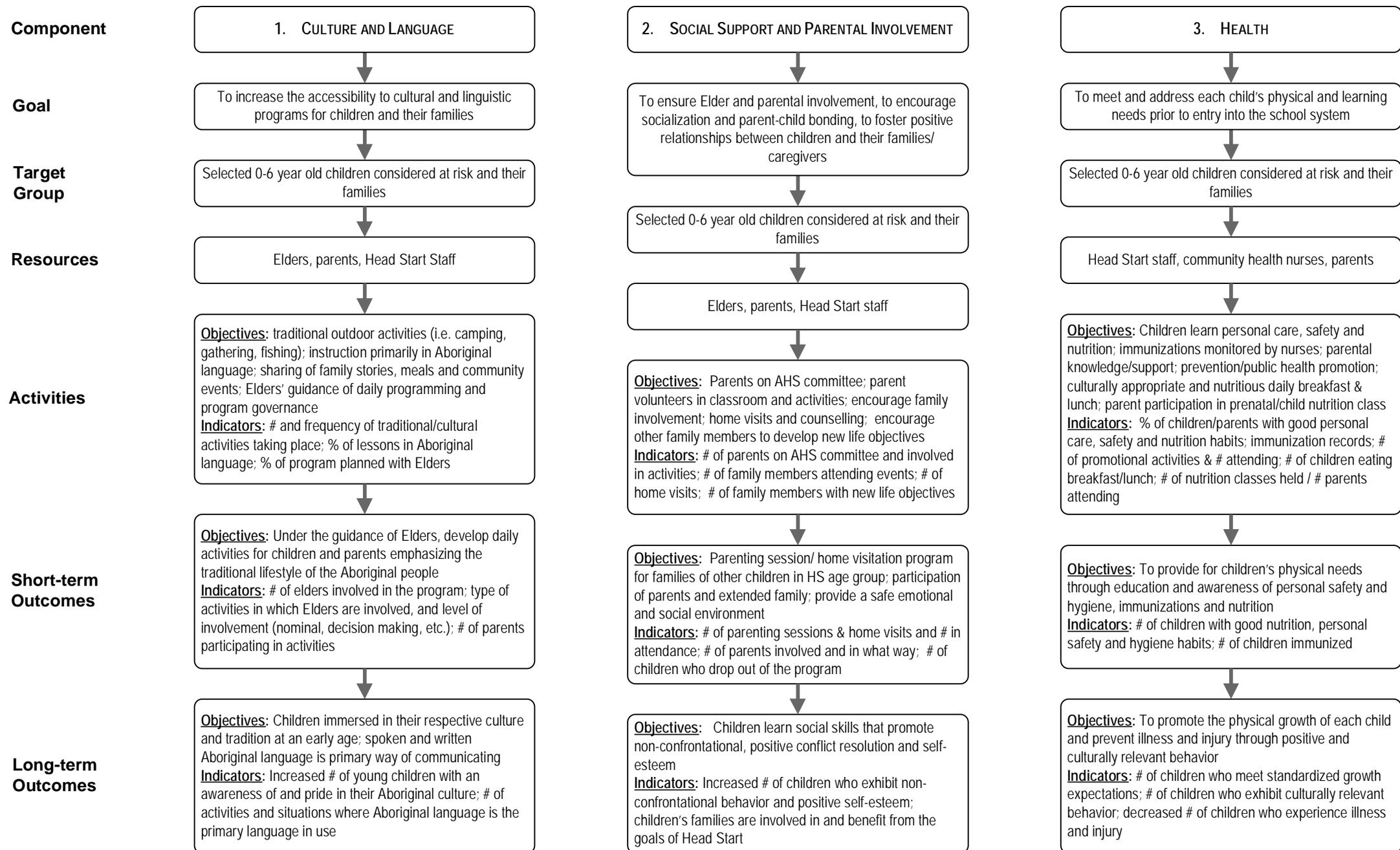


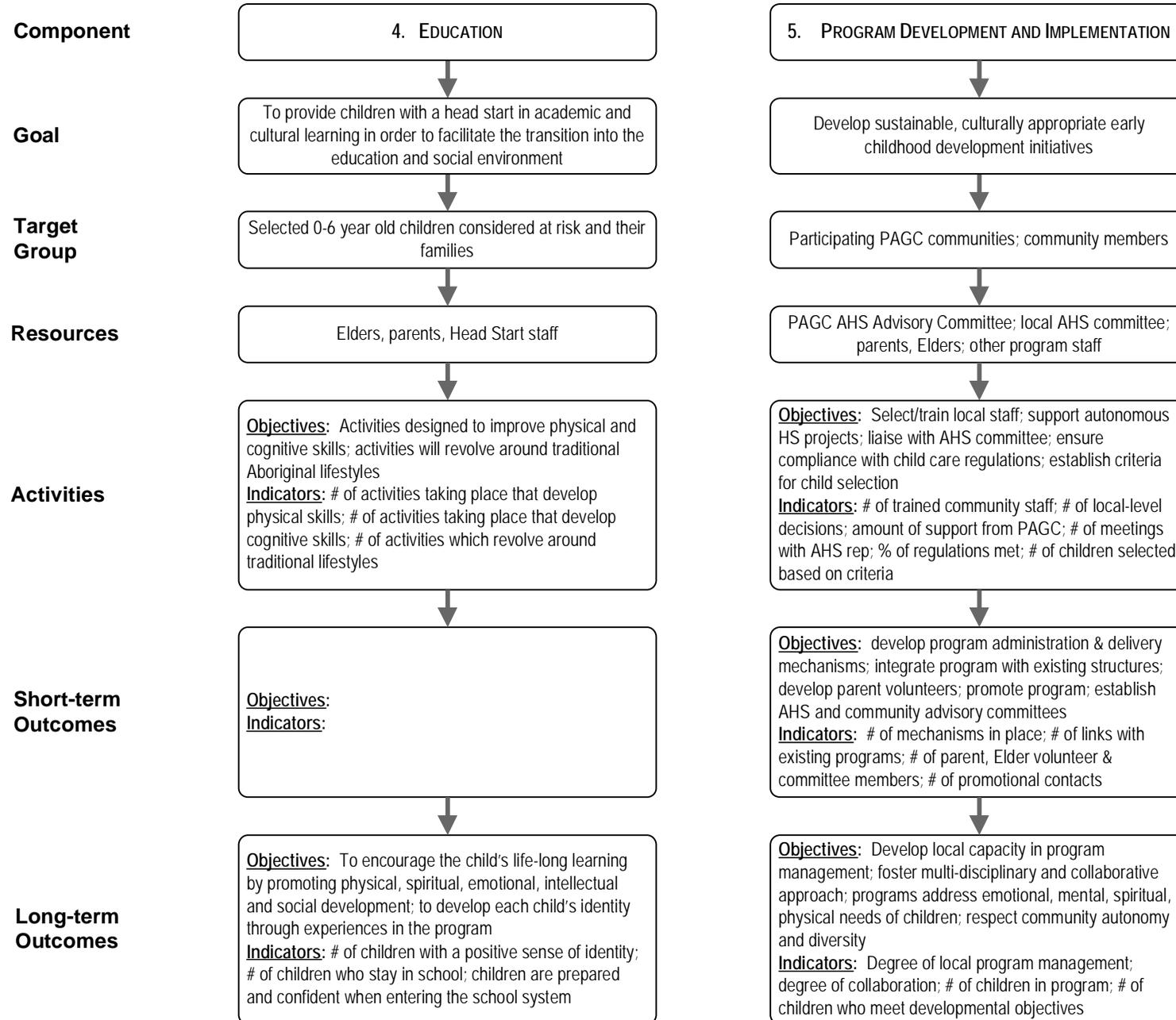
# Environmental Health



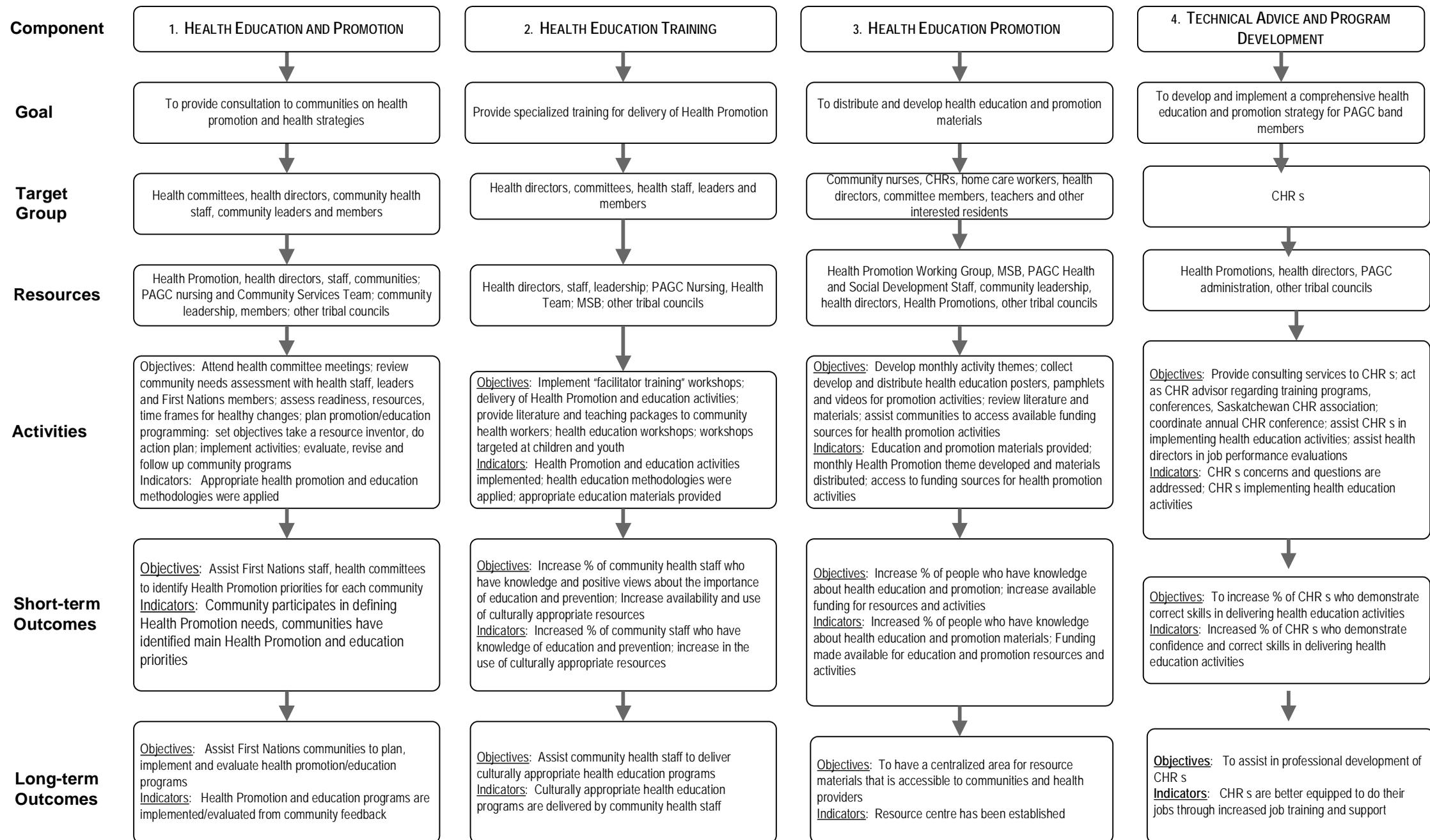
# Head Start

To foster community and family healing, by mobilizing community and regional resources, to provide children with the programs and resources they need to develop a healthy body, mind, emotion and spirit.



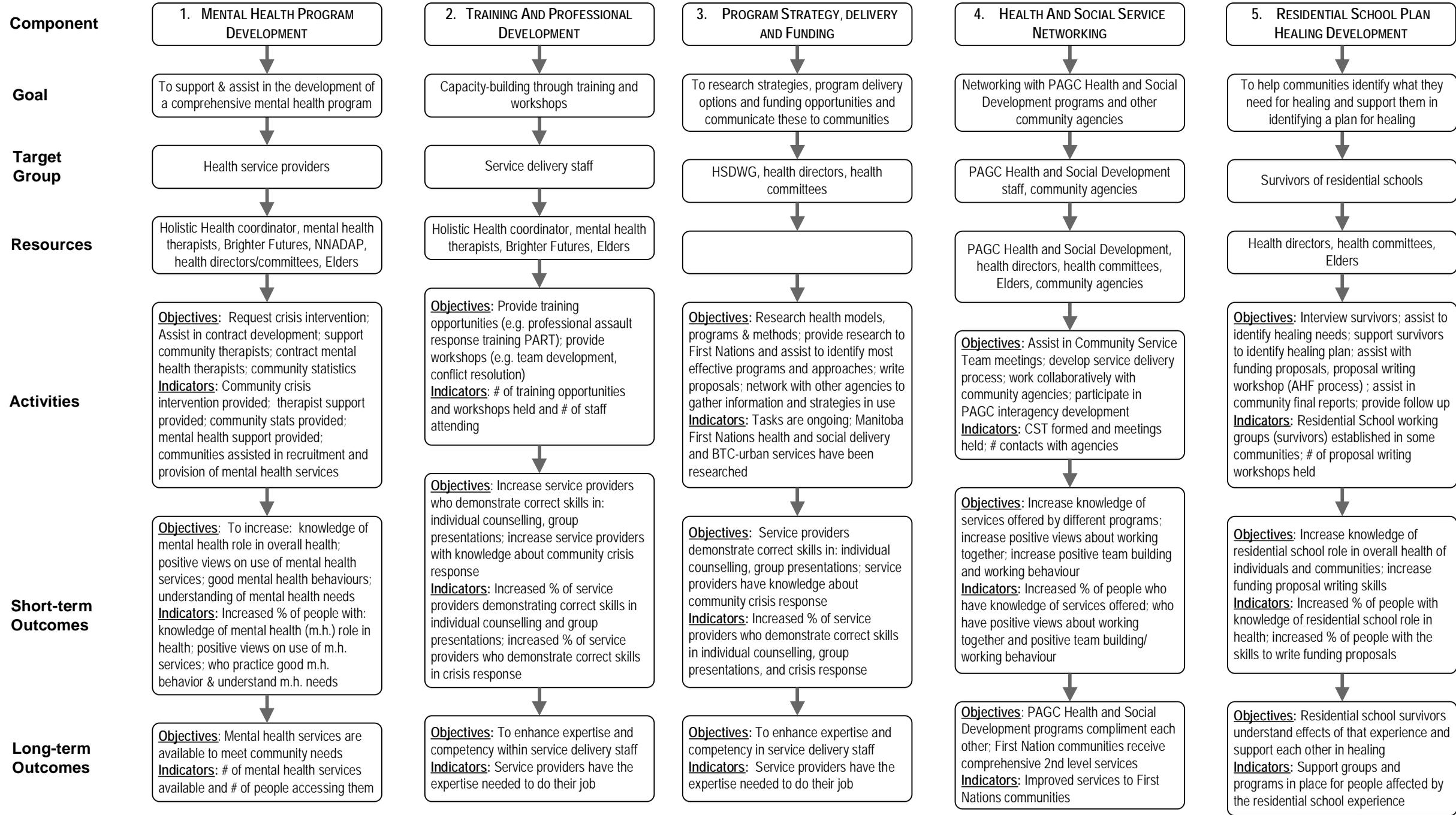


# Health Promotion



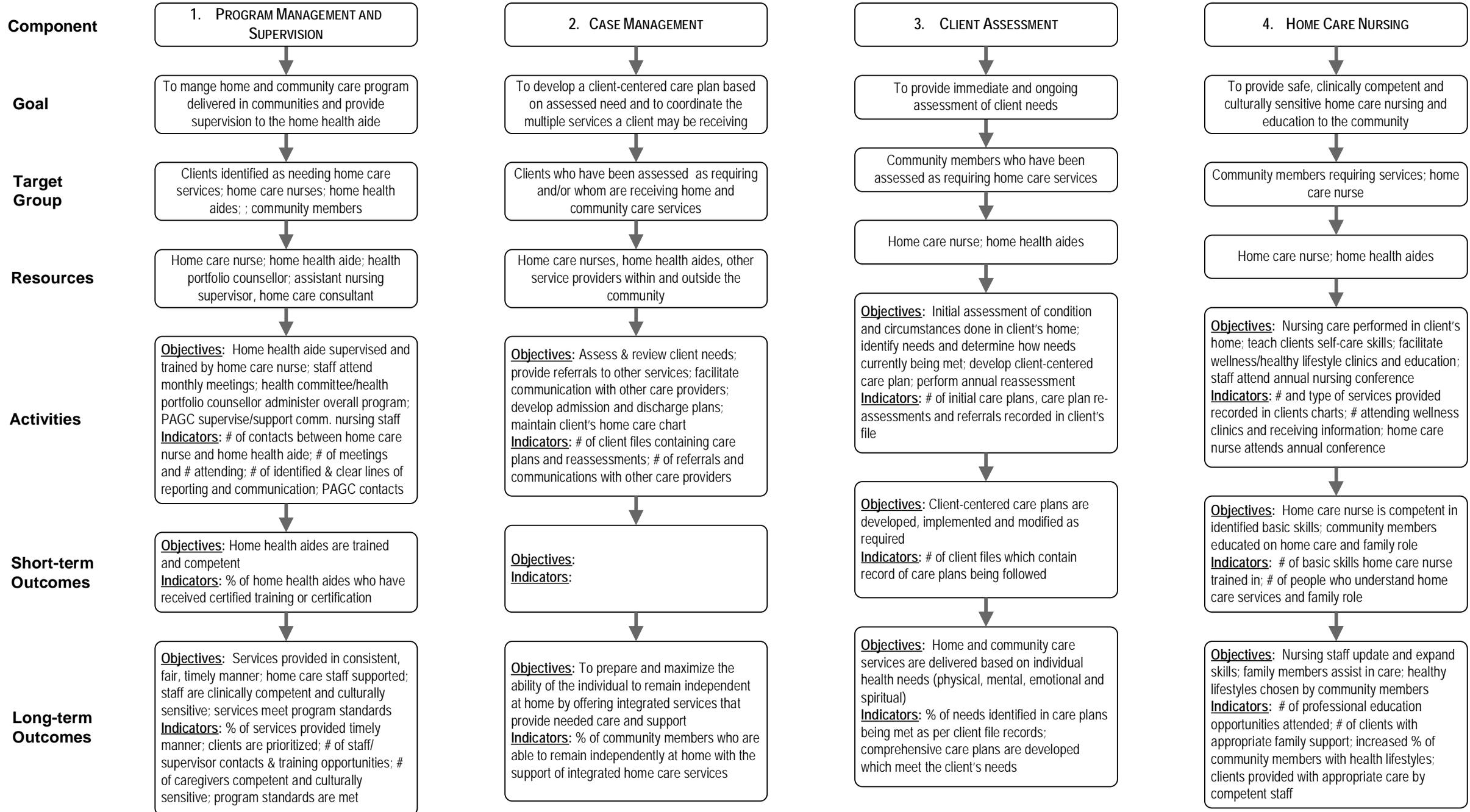
# Holistic Health

To review research and develop holistic health programs for the First Nations of PAGC and to provide ongoing advice and consultation services to First Nations.

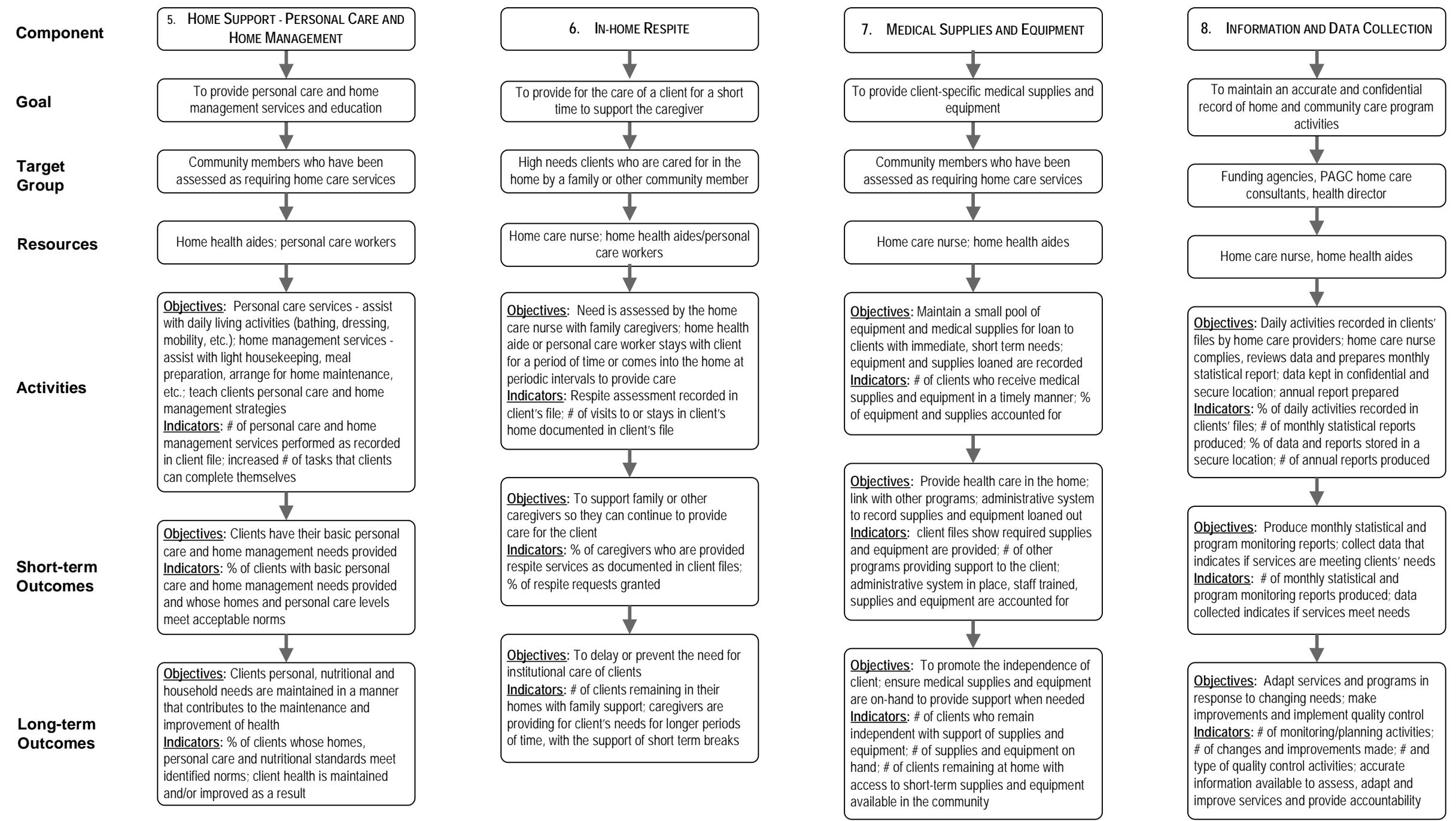


# Home and Community Care

To provide basic home and community care services that are comprehensive, accessible, effective and equitable to that of other home care services, and which are delivered in a culturally sensitive manner responsive to the unique needs of each community.

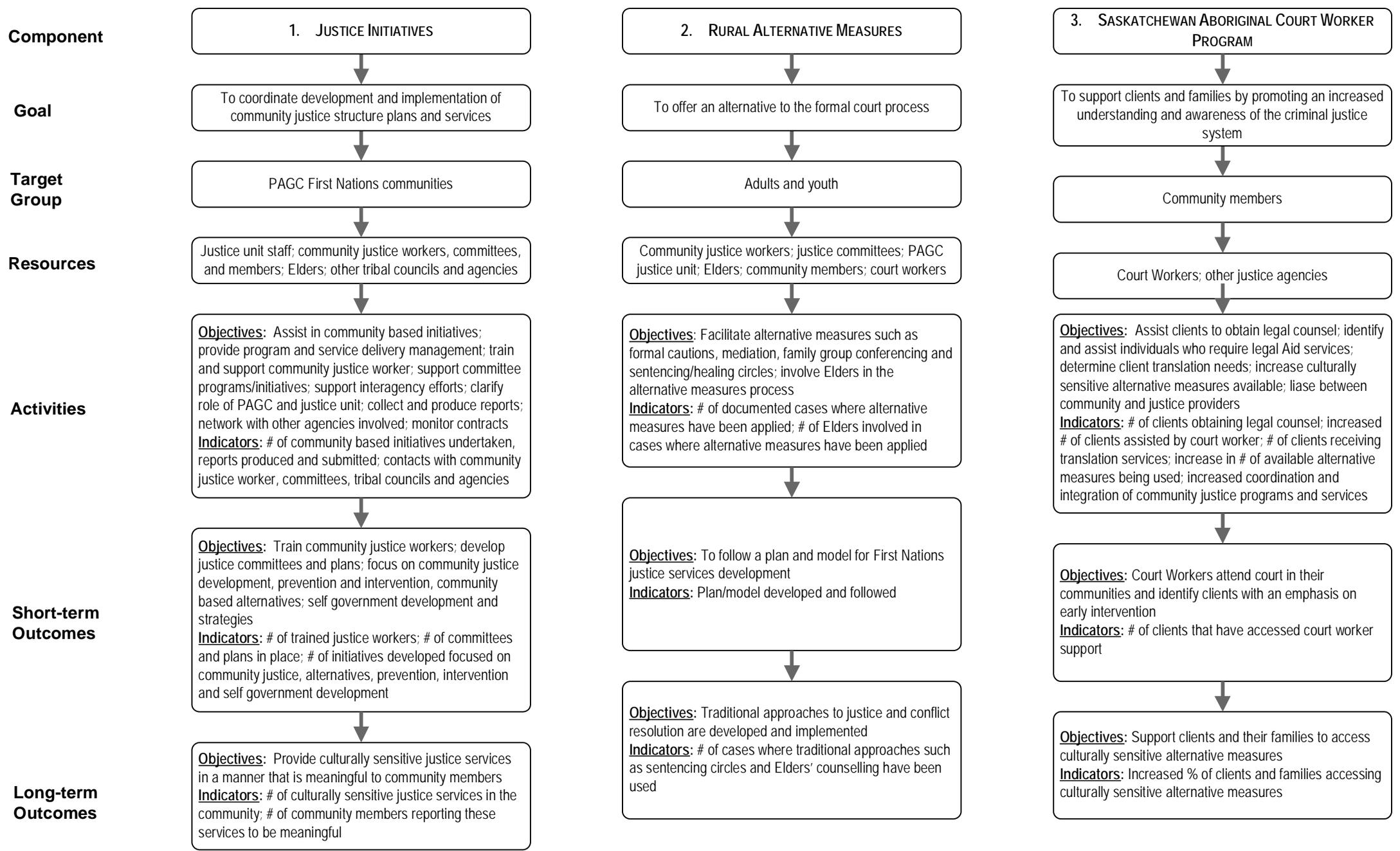


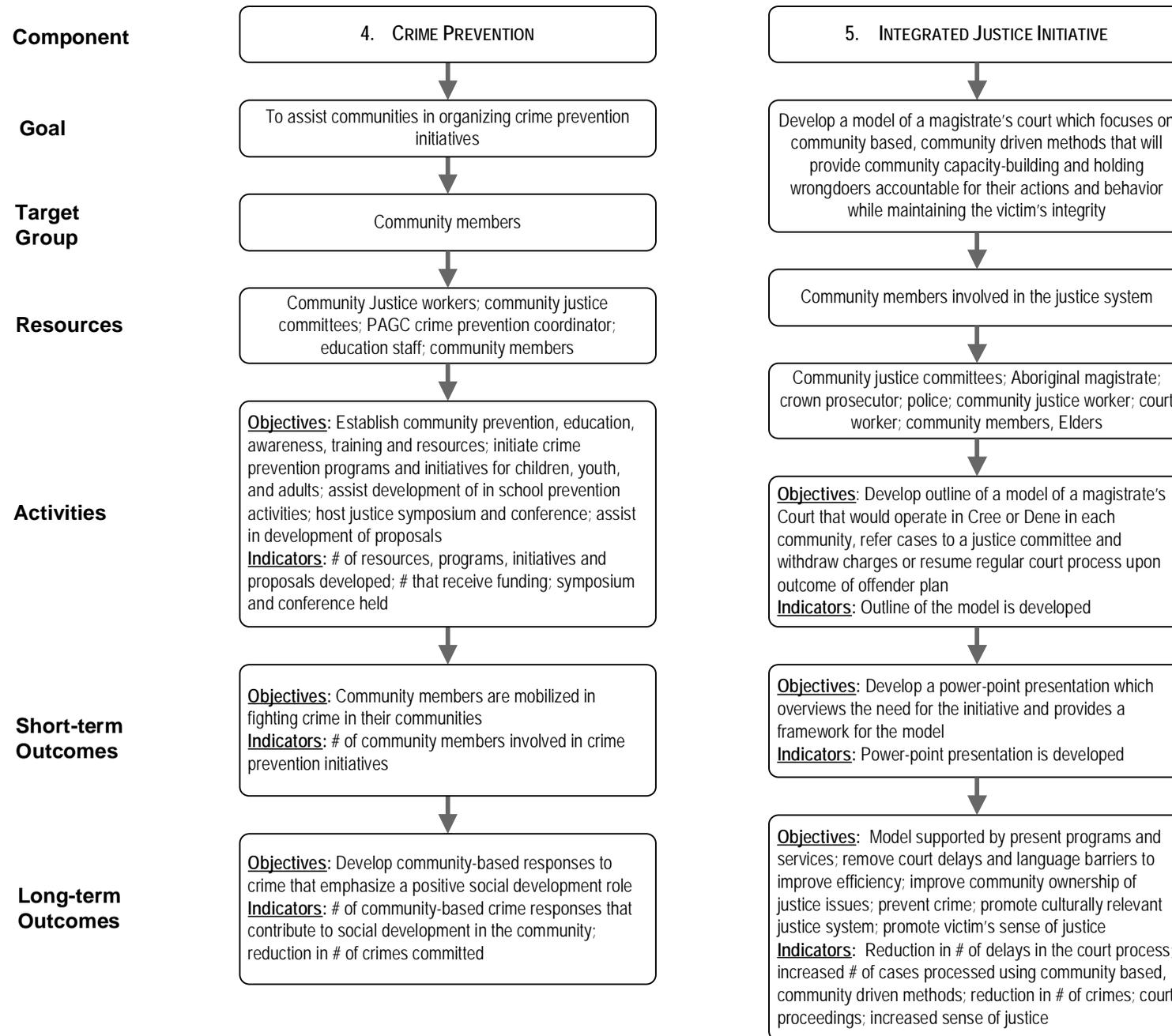
# Home and Community Care



# Justice Program

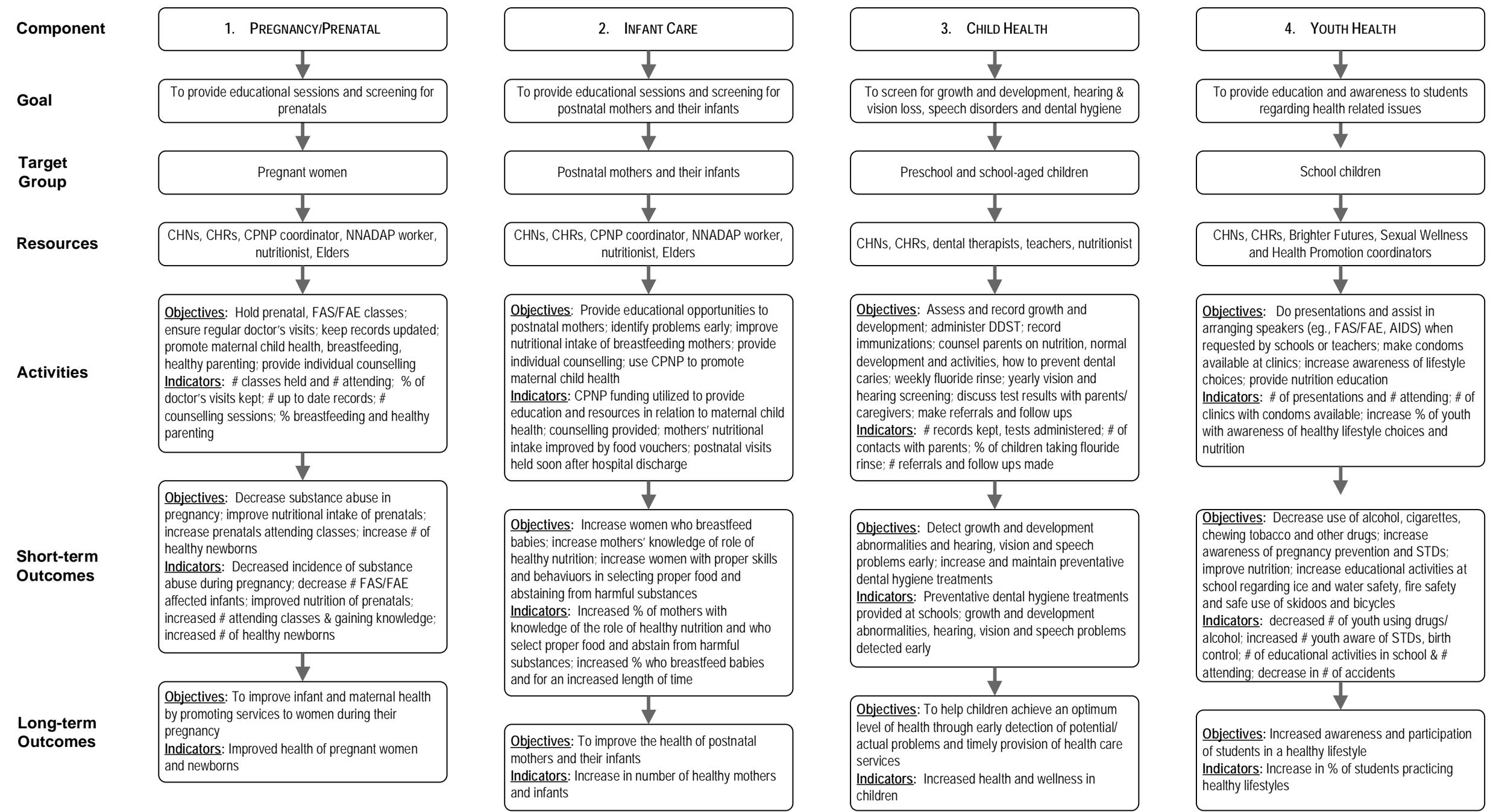
To enhance and support the provision of justice services and to develop new initiatives in a culturally sensitive manner, recognizing the importance of utilizing First Nation methods to heal both individuals and communities in the PAGC region and surrounding areas while adhering to the spirit and intent of the treaties.

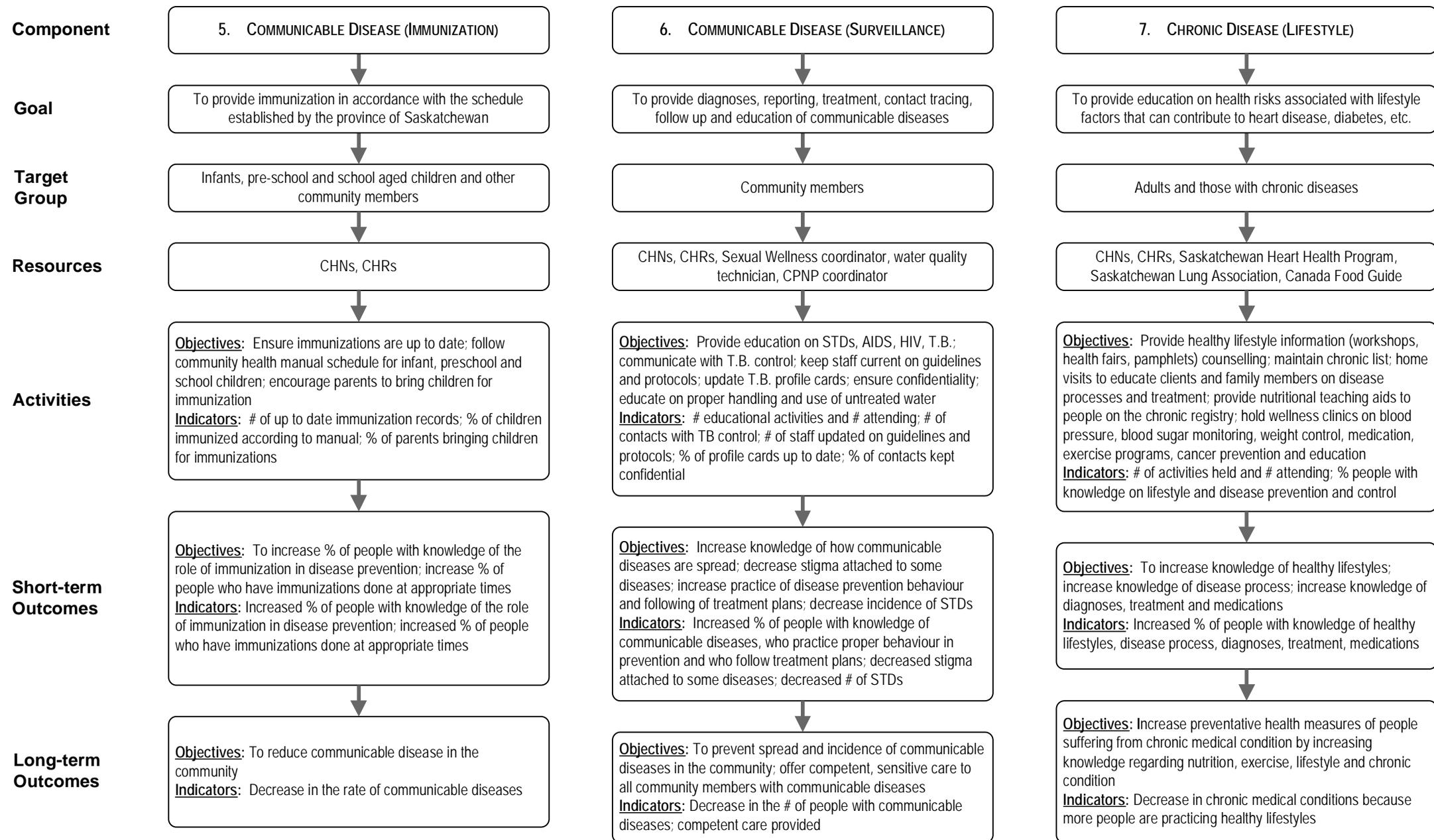


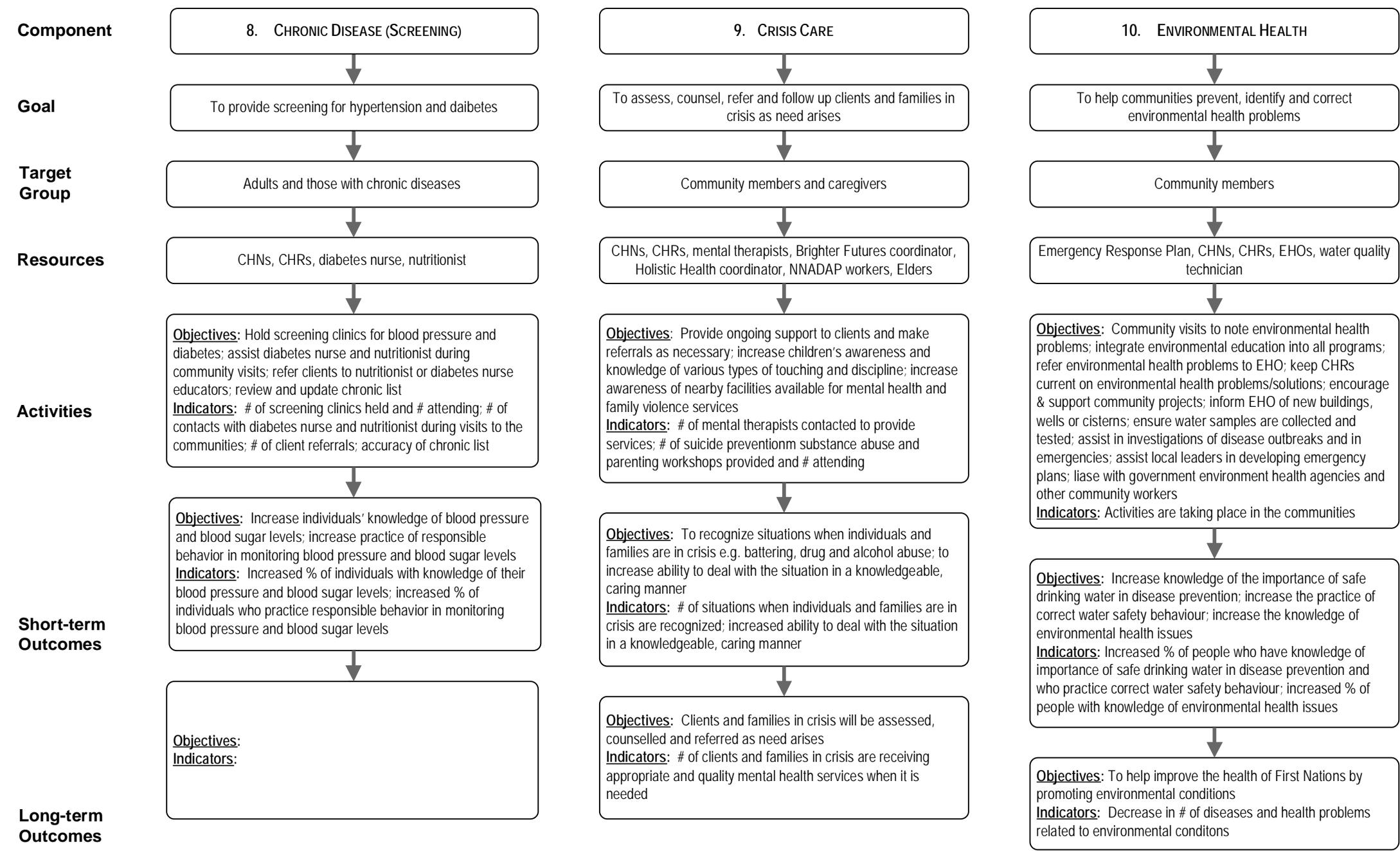


# Nursing

To provide and facilitate a quality holistic nursing service that empowers individuals, families and communities to achieve and maintain wellness.

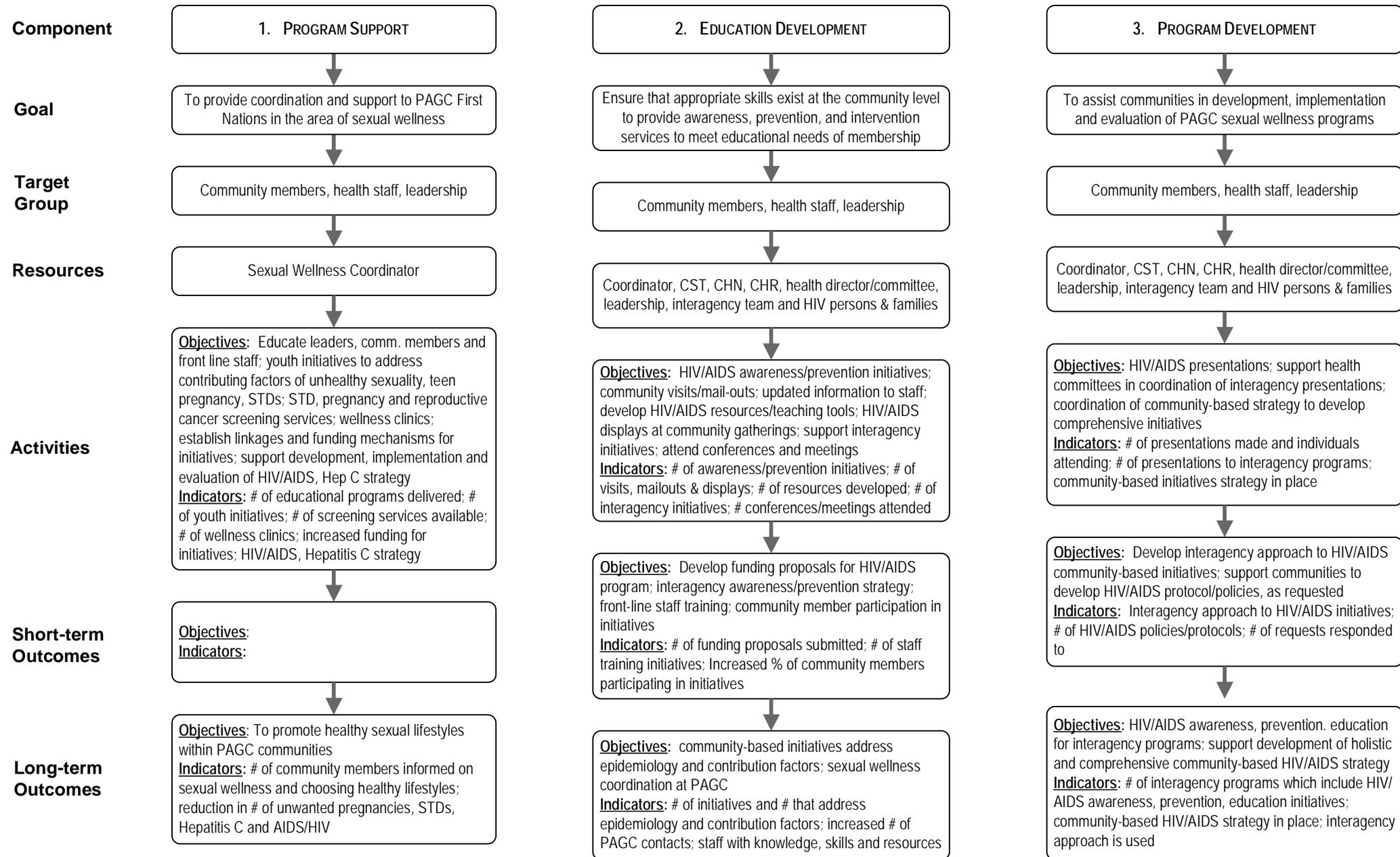






# Sexual Wellness

To enhance the development of a holistic and multidisciplinary approach to address the promotion of healthy sexuality within PAGC First Nations.



# Sports, Culture and Recreation

**Goal**

To promote sports, culture and recreation activities that will benefit all members of the Prince Albert Grand Council -

**Target Group**

PAGC youth and other community members

**Resources**

Recreation coordinators; band councillors; Elders, community members; women's commission

**Activities**

**Objectives:** Participate in First Nation Summer and Winter Games and North American Indigenous Games; organize coaching clinics in communities (track, hockey, softball, women's hockey); annual Deneseline gathering; round dances, hand games; PAGC coordinators visit communities to develop recreation programs; hold meetings with recreation coordinators; provide recreation and leisure programs in the community  
**Indicators:** # of games participated in and athletes involved, # of coaching clinics held in communities; # of community members participating; # of cultural activities held; # of community members participating; # of community visits made; # of recreation programs developed; # of meetings held with recreation coordinators; # of community based recreation and leisure programs

**Short-term Outcomes**

**Objectives:** Raise awareness of sports, culture and recreation within PAGC First Nations; work in partnership with provincial recreation authorities and FSIN sports commission; participate in regional, provincial and national sport competitions; develop athletes and coaches at the community level; develop a strategic plan to raise fiscal and human resources for sports, culture and recreation programs; incorporate Elders in cultural programming  
**Indicators:** # of community members who are aware of program activities available to them; # of contacts with provincial recreation authorities and FSIN sports commission; # of PAGC member participation; # of community members participating; % of athletes and coaches developed via activities held in their home communities; amount of fiscal and human resources raised as a result of initiatives contained in a strategic plan; # of Elders involved in cultural programming

**Long-term Outcomes**

**Objectives:** Address and promote youth involvement in sport, culture and recreation; develop and maintain quality recreation facilities within PAGC First Nations; provide opportunities for the promotion of an active, healthy lifestyle; promote and showcase First Nation cultural heritage  
**Indicators:** % of youth participating in sport, culture and/or recreation activities; increased # of facilities in PAGC communities; increase in quality of facilities; increased # of recreation and sport opportunities available to community members; increased # of events that showcase First Nation cultural heritage; % of community members participating; youth and community members are aware of sports, culture and recreation opportunities and enjoy an improved lifestyle through participation

**Phase I  
INTERVIEW QUESTIONS  
Health Directors  
April 2003**

**PART A**

1. Please tell me about your particular role in planning and delivering health services in your community.
2. What would you say are the key issues that may be affecting the health of your community?
3. People often talk about the wellness of their communities. In what ways do you think community wellness is the same as your view of community health? Is it different from your view of community health?
4. What do you think of when you hear people talk about having capacity in your community? (Refer to table: These are some of the ways that people define the different elements of community capacity. I would like to go through each of these with you and ask which ones fit for your community. What is missing from this information?)
5. We have talked a little about your views of community health and wellness and we have also heard your views on community capacity. We are interested in knowing how you think capacity in your community is related to the health of your community.

This is challenging for all of us to think about so, as a starting point, I would like to share how some others see the linkages between community health, wellness, and capacity. Then I'll ask you to talk about which aspects of these would fit for your community and to identify what is missing that is important in your community.

6. Do you have any other comments that you would like to make?

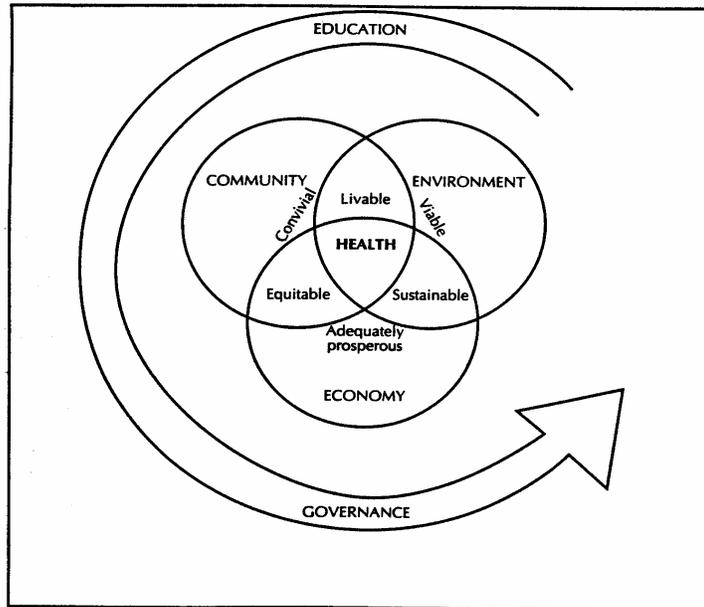
#### QUESTION #4

Examples of Community Capacity Elements:

Authors	Bjaras & Haglund 1991	Goodman et al. 1998	Bopp et al. 2000	Laverack 1999
<b>Domains</b>	<ol style="list-style-type: none"> <li>1. Needs assessment</li> <li>2. Leadership</li> <li>3. Organization</li> <li>4. Resource mobilization</li> <li>5. Management</li> </ol>	<ol style="list-style-type: none"> <li>1. Social networks &amp; inter-organizational relationships</li> <li>2. Community resources</li> <li>3. Sense of community</li> <li>4. Understanding community history</li> <li>5. Citizen participation</li> <li>6. Community leadership</li> <li>7. Skills</li> <li>8. Community values</li> <li>9. Critical reflexivity</li> <li>10. Community power</li> </ol>	<ol style="list-style-type: none"> <li>1. Shared vision</li> <li>2. Sense of community</li> <li>3. Communication</li> <li>4. Participation</li> <li>5. Leadership</li> <li>6. Resources, knowledge and skills</li> <li>7. Ongoing learning</li> </ol>	<ol style="list-style-type: none"> <li>1. Participation</li> <li>2. Leadership</li> <li>3. Organizational structures</li> <li>4. Problem assessment</li> <li>5. Resource mobilization</li> <li>6. 'Asking why'</li> <li>7. Links with others</li> <li>8. Role of outside agents</li> <li>9. Program management</li> </ol>

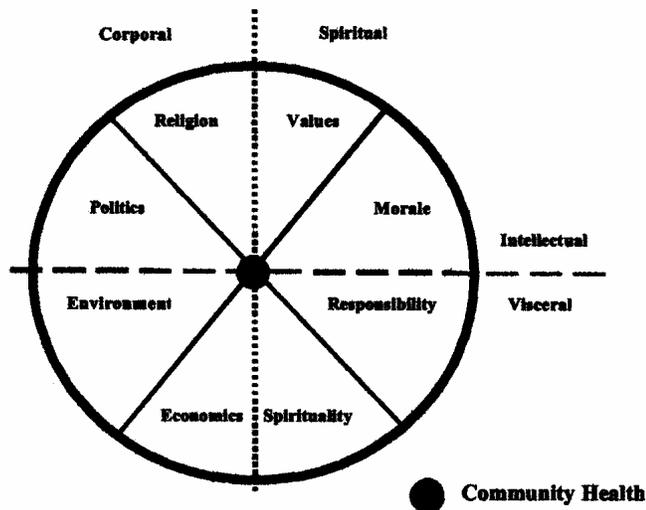
**QUESTION #5**

**Figure 1:** Basic Framework for Health Indicators



**Source:** Hancock, T., Labonte, R., & Edwards, R. (2000). Indicators that count! Measuring population health at the community level. *Canadian Journal of Public Health*, 90(Supp 1), S22-26.

**Figure 2:** Community Life Indicators Wheel



**Source:** Leech, D., Lickers, F.H., & Haas, G. (2002). *Innovating a new way for measuring the health of Aboriginal communities*. Ottawa, ON: University of Ottawa.

**Phase I  
INTERVIEW QUESTIONS  
Health Directors  
April 2003**

**PART B**

We would like to review, with you, the program logic models that we developed based on written program information. We will ask you to reflect on the following questions for each of the programs:

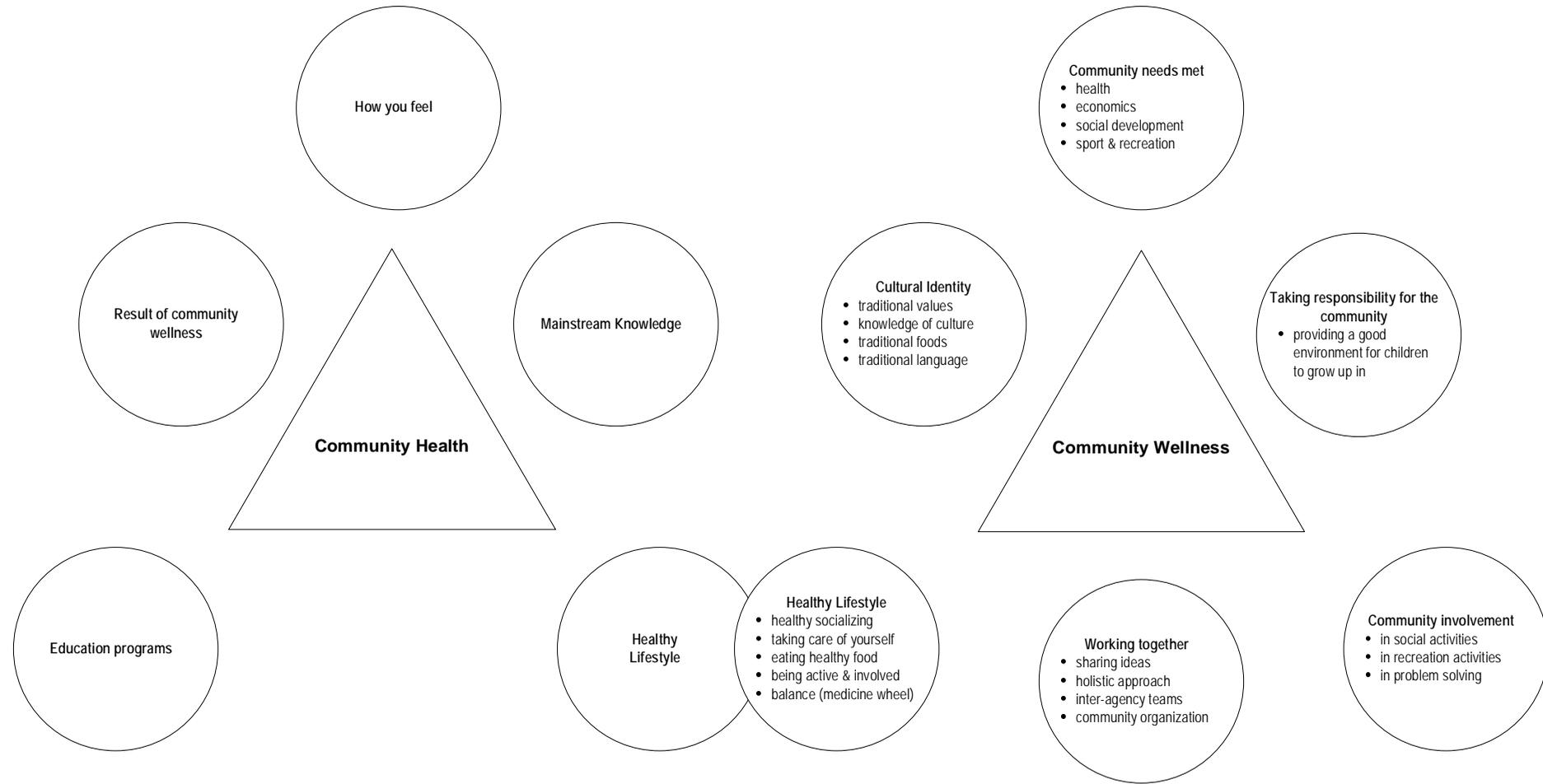
1. From your perspective, do each of the program models correctly describe the programs that are currently being delivered in your community?
2. From your perspective how do each of these programs contribute to:
  - a. The health of your community?
  - b. The capacity of your community?

## Appendix H

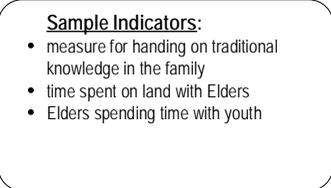
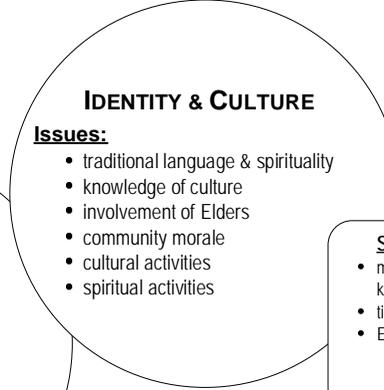
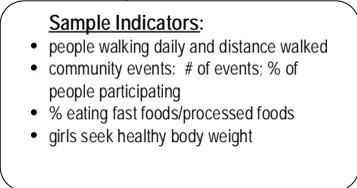
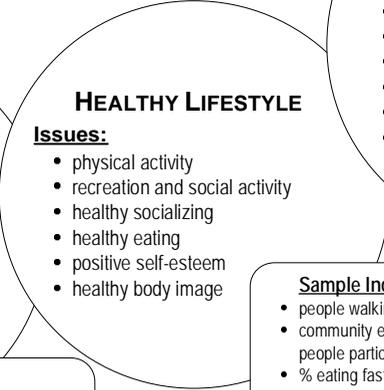
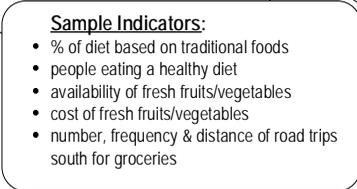
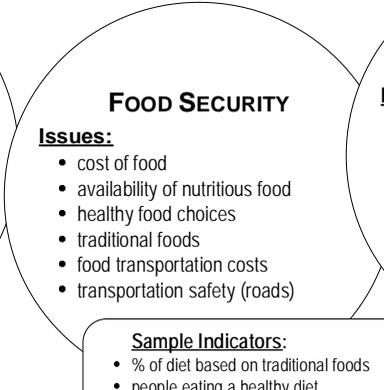
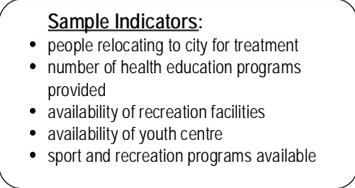
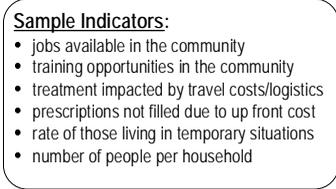
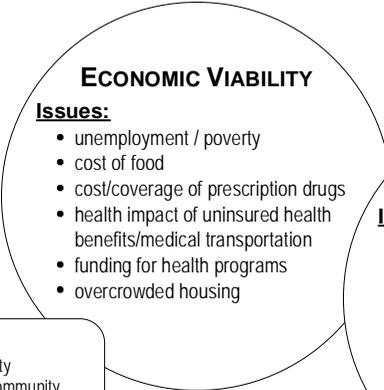
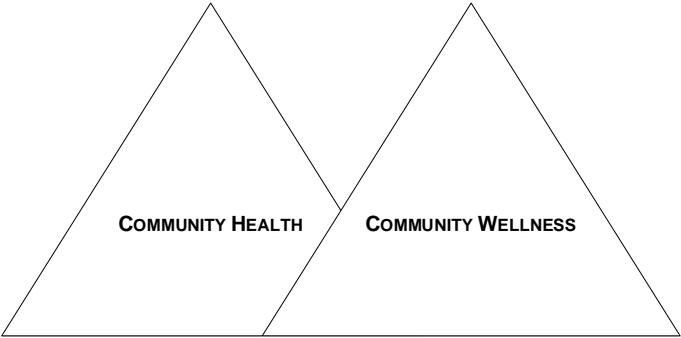
### Draft Evaluative Indicators Framework Presented at Focus Groups

Diagram 1 – Concepts of Community Health and Community Wellness

Diagram 2 – Key Domains of Community Health and Community Wellness



**Diagram 1**  
**Concepts of Community Health and Community Wellness**



**Diagram 2**  
**Key Domains of Community Health and Community Wellness**

**Phase II  
INTERVIEW QUESTIONS  
Focus Groups**

1. Community Health and Community Wellness

- a. What does 'community health' mean to you?
- b. What does 'community wellness' mean to you?
- c. When you look at the draft framework what is your understanding of:
  - i. Economic viability?
  - ii. Services and infrastructure?
  - iii. Food security?
  - iv. Healthy lifestyle?
  - v. Identity and culture?
  - vi. Health issues?
  - vii. Addictions?
- d. Are there any areas that are missing that should be included as part of how we would measure community health? community wellness?

2. Community Capacity

- e. What does 'community capacity' mean to you?
- f. When you look at the draft framework what is your understanding of:
  - i. Understanding community history?
  - ii. Community values?
  - iii. Sense of community?
  - iv. Education and training?
  - v. Youth involvement?
  - vi. Leadership?
  - vii. Needs Assessment?
  - viii. Organization?
  - ix. Resource mobilization?
- g. Are there any areas that are missing that should be included as part of how we would measure community capacity?

## Appendix J

### Community Health Framework – Final

# Key Domains & Indicator Categories: Community Health and Community Wellness



## Appendix K

### An Example from the Toolkit

Community Health Indicators Framework

Domain: Services & Infrastructure

Indicator Category: Service Delivery

Identified Issue: Elders

Indicator: #27 – Medical Translation & Companion Services

## Services & Infrastructure

Defined as the availability and access to services and related infrastructure; respectfully delivered health and human services; adequate and affordable housing, recreation facilities and programming; and specialized services designed to meet the needs of Elders and youth.

### Indicators:

#### Community Infrastructure

##### Sewer & Water

- 1 – houses with/without water & sewer
- 2 – water borne illnesses
- 3 – houses relying on bottled water

##### Locally Staffed

- 4 – treatment facilities without staff
- 5 – facility staff from community
- 6 – community staff training levels

Indicator #2

##### Roads

- 7 – accidents on roads
- 8 – repairs due to road conditions

#### Service Delivery

##### Local

- 9 – services available in community
- 10 – health professionals in community
- 11 – visits by health professionals
- 12 – local service usage

13 – community training in ERT

14 – distance from services

##### Consistent

- 15 – frequency of health service delivery
- 16 – scheduled services delayed
- 17 – time to complete treatment plans
- 18 – treatment completed/compromised

#### Compassionate

- 19 – wait time for appointment transport.
- 20 – compassionate policy exceptions
- 21 – cultural awareness programs

#### Confidential

- 22 – service confidentiality guidelines
- 23 – staff trained on confidentiality

#### Youth

- 24 – specific services for youth
- 25 – new funds for youth programs
- 26 – youth addiction treatment facilities

#### Elders

- 27 – medical translator/companion

- 28 – meals on wheels program
- 29 – social gathering place for Elders
- 30 – programs & activities for Elders
- 31 – local palliative care for Elders

#### Infrastructure

- 32 – size/capacity of facility
- 33 – suitability of facility
- 34 – facility usage
- 35 – proper equipment for facility

#### Housing

##### Availability

- 36 – residents per house

... continued on next page

37 – generations per house

38 – Tuberculosis rates

39 – housing waiting lists

#### Quality

40 – houses in need of repair

41 – quality of housing insulation

42 – presence of black mold

43 – frequency of sewer back-ups

44 – accidents in the home

45 – EHO inspector visits

#### Elders

46 – housing units designed for Elders

47 – house maintenance for Elders

#### Affordable

48 – low cost housing units

49 – % of income required for housing

#### Jurisdiction Fragmentation

50 – agencies responsible for housing

51 – time to complete house repairs

#### Ownership

no indicators proposed

#### Recreation

##### Facilities

52 – type/condition of recreation facilities

53 – programs with proper equipment

#### Programming

54 – activities available

55 – summer activities available

56 – programs cancelled

57 – participation & retention levels

58 – age range of participants

#### Staffing

59 – funding for trained staff

60 – programs run by staff vs volunteers

61 – range of programs offered

62 – participation and retention levels

63 – support for recreation staff

#### Youth

64 – youth centre in community

65 – youth involved in programs

66 – school drop out rates

67 – school absentee rates

68 – youth alcohol and drug use

#### Promotion

Indicators #54, 57, 58

69 – direct contacts to provide information

#### Affordable

70 – cost of recreation to users

71 – volunteers assisting with programs

72 – utilization of existing resources

#### Technology

##### Current

73 – water/sewer technology used

##### High Speed Internet

74 – internet use in the community

75 – internet technology at health facility

76 – distance education enrolment

77 – internet reliability

#### Data Management

no indicators proposed

#### Service Sustainability

##### Sufficient Funding

78 – levels of program/service funding

79 – program needs met by funding

80 – vacant positions

##### Stable Funding

81 – long term vs short term funding

82 – duration of programs

83 – programs cancelled

84 – staff turnover rates

indicator #80

85 – funding commitments honoured

#### Jurisdiction Fragmentation

86 – # agencies involved in funding

87 – resources allocated to administration

#### Participation

88 – service staff from community

89 – staff turnover rates

90 – mechanisms for participation

91 – health education and awareness

#### Collaboration

92 – community inter-agency meetings

93 – regional inter-agency meetings

94 – service delivery collaborations

#### Communication

95 – community newsletter

96 – community meetings

#### Realistic

indicator #12

97 – proximity of duplicate services

98 – medical transport driver/patient ratio

99 – funder cutbacks re: abuse perception

#### Staffing

indicator #21

# Services & Infrastructure

Services & Infrastructure >> Service Delivery >> **Elders**

**Issues Identified:** *Services for Elders are seen as very important to ensuring they are involved in the community, are involved with youth, and have the necessary supports to allow them to remain in the community as they grow old.*

Indicator #	Community Proposed Indicator	Community Level Data Sources (suggestions)
27	<p><b>Medical translation &amp; companion services available and funded</b></p>	<p>Local survey required</p>
28	<p><b>Meals on wheels program in community</b></p>	<p>Local survey required</p>
29	<p><b>Social gathering place for Elders (e.g. coffee house)</b></p>	<p>Local survey required</p>

# Services & Infrastructure

Services & Infrastructure >> Service Delivery >>

## Medical Translation & Companion Services

**Issues Identified:** Medical translation and companion services are important for the quality of care, safety and comfort of community members traveling outside the community for medical services. With the assistance of a translator, Elders can communicate their needs and understand the care they receive. Safety issues for both Elders and youth can be addressed by traveling with a companion, which can also reduce the stress of such trips.

**Proposed Indicator:** **# 27** – Medical translation and companion services available and funded

**Suggested Measure:** Compare the number of medical trips where translation and/or companion services are provided to the number of medical trips where these services were requested, or were deemed to be needed, but were not provided.

**Information Source:** Local survey

### How to use this measure:

**Step 1)** Identify the # (number) of medical trips where translator or companion was requested or deemed to be needed, within a given timeframe. This could also be broken down by group (i.e. Elders, youth).

**Step 2)** Identify the # of trips where a translator or companion was provided and funded, within the timeframe (and for the specific group).

**Step 3)** Use the 'Indicator Calculation Tool' formula to calculate the measure.

Indicator Calculation Tool	Calculation Example
$\frac{(\quad) \text{ trips - translator/companion provided}}{(\quad) \text{ trips - translator/companion requested or needed but not provided}} \times 100$ <p>= % translation/companion needs met</p>	$\frac{15 \text{ trips - translator/companion provided}}{25 \text{ trips - translator/companion requested or needed but not provided}} \times 100$ <p>= 60% translation/companion needs met</p>
<p>X = multiplied by      ( ) = Insert number here      — = divided by</p>	

### What does this information mean?

Only ten percent (60%) of the needed or requested translation or companion services are being provided. This information could be used to demonstrate the need for more funded services, or to identify the level of service provided to particular groups, such as Elders.