

## **Empowering Communities by Applying Community Health Impact Assessment**

Decentralization of health care and health care decision-making has become a trend around the globe. The People Assessing Their Health (PATH) process is designed to provide people with the knowledge and tools they need to become informed participants in decision-making about health.

PATH is a participatory, community development process designed to engage community members and organizations in developing and promoting healthy public policy. Developed in northeastern Nova Scotia, Canada, the process has also been used successfully in northeastern India.

### **The PATH Process**

The PATH process uses a variety of adult education techniques to help participants broaden their understanding of health and the many factors that determine health of individuals and communities. Based on this new understanding, participants develop a resource or “tool” unique to their community that can be used to examine the effect that particular programs, policies, projects or services will have on the health of the community. This examination, called community health impact assessment (CHIA) can also suggest ways to maximize the positive effects of an activity as well as ways to minimize the negative effects of such a policy or program. CHIA is not used to decide whether a program or policy is right or wrong; rather it helps identify how a particular program or policy helps or diminishes the many factors that the community considers important for its’ well-being.

In the spring of 2003, Colleen Cameron and Susan Eaton of the Coady International Institute, traveled to Kolkata to work with the Association for Social and Health Advancement (ASHA). The Coady International Institute, located at St. Francis Xavier University, Canada, has been providing educational opportunities for community development workers from over 130 countries since it was founded in 1959. ASHA, which began in 1999, is a non-government organization (NGO) based in Kolkata. Its mission is to assist disadvantaged communities to improve their life conditions.

### **CHIA**

A workshop was held with ASHA staff and volunteers. The goal of the workshop was to have the participants understand the purpose and process of a community health impact assessment (CHIA) and be able to carry it out at the local level. The process began by helping the participants to identify the factors that make individuals and communities healthy. Based on these factors, the group developed a vision of a healthy community:

“In a healthy community...

Primary needs are fulfilled,

Health care services are available and accessible,

There is 100% literacy,

People have sustainable livelihoods,

Social, cultural and religious activities are accessible,

There is an eco-friendly environment,  
Social security is assured,  
Human rights are respected,  
People accept their responsibilities and duties,  
There is peaceful co-existence and harmony,  
There is good governance,  
There is no gender bias.”

Participants in the ASHA workshop used this vision as the foundation for their own community health impact assessment tool (CHIAT), which contains a list of things that would be necessary in order for the vision to be achieved. This tool can now be used to determine if the programs and projects that ASHA is facilitating within various communities are actually contributing to the development of a health community. It also allows them to determine what can be done to improve the project or program. In addition, developing a vision of a healthy community has been useful for ASHA in facilitating community level planning exercises in the villages in which they work.

### **Vision of a healthy community**

Following the work with ASHA staff and volunteers, the PATH process was undertaken in Chandamari Village of Murshidabad District, West Bengal with members of two women’s self help groups, Nabayan Mahila Samity, and Nabajiban Mahilar Samity. These women looked at their own experiences of health and ill-health, made a list of factors that determine health, and developed a vision of a healthy community that reflected the priorities for their community:

“Improved economic conditions (adequate opportunities for income generation)  
Regular, nutritious food for everyone  
Good roads and better communication facilities  
Electrical supply in the village  
Availability of safe drinking water (tube wells with arsenic filters)  
A sanitary latrine for each family  
Education for all villagers  
Available and appropriate health care  
Healthy development of children  
Educated Panchayet representatives  
Health awareness for all  
Healthy environment  
Small families  
Opportunities for women’s improvement.”

Based on the key elements of their vision of a healthy community, the women’s group developed their own community health impact assessment tool (CHIAT).

### **Sense of value and empowerment**

One of the most important benefits of this process for the women in the self-help group was an increased sense of value and empowerment. Their self-image was enhanced as

they interacted with different people during the three day exercise. They are now more respected and valued in their families and in the community. Even the local Panchayet leaders give value to their opinions. They are more confident about meeting officials at the block level to discuss their problems. These women have undergone change at a both the personal and group levels.

The women's group increased their numbers after participating in the PATH process as well as becoming involved in a variety of economic activities. Previously, these women were involved in beedi-making with the help of their children. After the participating in the PATH process they became aware of the problems that beedi-making created for their own health and the health of their children. As a result, they asked for training and support from ASHA to initiate other forms of economic activity. Five members of the group took vocational training on the making of detergent powder. This vocational training has led the women to think about and try to initiate new economic activity other than beedi-making. The group members have continued with their regular savings activities, which they see as important for their well-being, and they have gradually increased their monthly savings by 100%. A number of members have benefited from loans provided by the group and have become involved in agriculture activities that improved their own monthly incomes, some by as much as Rs 600-700.

Overall these women have increased critical consciousness in the community regarding the health of community members. They have organized health awareness programs with support from ASHA. They have helped other community members initiate healthy behaviours such as immunization and infant feeding practices. The women encourage children in their villages to attend primary school regularly and this has resulted in the number of school drop-outs decreasing.

The PATH process was also empowering for the ASHA staff and volunteers because it helped them to think critically and analyze situations by considering the different socio-economic aspects of community development. They have come to realize that because the health and well-being of a community depends on a wide range of factors, a holistic approach is required to bring about positive change. They realize that community participation is essential for sustainable development and that the PATH process is an excellent first step in a participatory approach to community planning.

The PATH process and the development of a CHIAT is an empowering process that equips community members with critical analysis skills, a vision of what a healthy community could look like, and a tool for informed decision-making and advocacy. The experience of the women in Chandamari demonstrates that the PATH process is an excellent first step towards good governance and health for all.

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