Public health is an integral element of a comprehensive and effective health system that is community-based and community-driven. The public health system has been at the forefront of change in the past and is well equipped to lead the way to a healthier future for the population of Nova Scotia.

The history of public health is a history of bringing science, knowledge and values together in the public arena to address the changing health issues that impact society. Early in the last century, public health efforts were focused on the prevention of communicable diseases, sanitation and maternal and child health. In the 1970’s, public health in Canada began to shift its resources toward lifestyle and risk assessment activities. By the late 1970’s and early 1980’s, a social model of health began replacing the more clinical or medical model of health. The new ideology for public health became the growing understanding that health is influenced by factors in the social, political, and economic context within which people live (Crutin & Robertson, 1997). Public health approaches, therefore, focus on the broad determinants of health, including people’s living and working conditions. Canada’s public health system has taken the lead in nation-wide programs that prevent disease and injury, and protect and promote health. This broad approach, which gets to the root of much of the illness and other health problems in Canada, underpins public health today (CPHA Board of Directors, 2001).

As an integral element of Nova Scotia’s health system, the purpose of this document is to describe who we are and what we do, demonstrating Public Health Services’ interaction with, and contribution to, Nova Scotia’s integrated health system.
In addition, both public health and population health:
• focus on the determinants of health,
• rely on inter-sectoral collaboration and cooperation,
• involve working with communities to find solutions, and
• are advocacy based.

A population health approach is an essential platform of the work of Public Health Services in Nova Scotia. Public Health Services practitioners are among many partners contributing to the health of the population of Nova Scotia.

What is population health?
The concept, definition and understanding have evolved over the past decade. Definitions transform to reflect more current thought but the overall intent and substantive beliefs have remained unchanged. The FPT Advisory Committee on Population Health’s definition for population health (1994) reads as follows:

Population health refers to the health of a population as measured by health status indicators and as influenced by social, economic and physical environments, personal health practices individual capacity and coping skills, human biology, early childhood development and health services. *

As an approach, population health focuses on the inter-related conditions and factors that influence the health of populations over the life course, identifies systematic variations in their patterns of occurrence, and applies the resulting knowledge to develop and implement policies and actions to improve the health and well-being of these populations.

How are population health and public health related?
The distinguishing feature of public health is that it focuses on the health of populations by:
• assessing and monitoring the interrelated conditions and factors (determinants) that influence the health of the population,
• informing the public and professionals about health issues and trends,
• developing and enforcing health protecting laws and regulations,
• implementing and evaluating population-based strategies to promote health and prevent disease, and
• assuring the provision of essential health services.

* While not included in this definition, gender and culture have since been recognized and affirmed as determinants of health.


**Public Health Services**

Public Health Services works in partnership with communities, families and individuals to prevent illness, protect and promote health and achieve well-being.

**Who We Are**

Public Health Services consists of an interdisciplinary team, that includes people working at the provincial, district and community levels of the health system. We are public health nurses, health educators, dental hygienists, nutritionists, support staff, medical officers of health, epidemiologists, and administrators/managers.

**What We Do**

- Assess the Health of Populations
- Health Surveillance
- Population Health Advocacy
- Health Promotion
- Disease/Injury Prevention
- Health Protection

**What We Value**

We Believe in ….

- Capacity building to improve health
- Community mobilization through community participation
- Interrelationship of promotion, prevention and protection
- Determinants of health
- Population health surveillance
- Partnerships amongst sectors
- Advocacy for health
- Evidence-based planning and evaluation

**Our Partners**

- Community health boards
- Health authorities
- Non-governmental and charitable organizations
- Interdepartmental & inter-sectoral peers
- Universities/academic institutions
- Community and health advocacy groups
- Provincial, federal, municipal & international committees and organizations
- Primary health care partners and primary care physicians

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We promote healthy lifestyle choices with youth.

We work with community health boards to develop and implement community health plans.

We provide health assessment for young children.
A population health approach requires a greater emphasis on these three functions. These three functions form the foundation for a responsive health system and enable Public Health Services to respond to population health issues from a sound evidence base.

The diagram on the next page shows how Public Health Services work will support the system through these three functions.

Traditionally, Public Health Services in Nova Scotia have focused on initiatives within these three functions. With a greater focus on the three functions above, Public Health Services efforts in these areas will be evidence-based and may have a greater impact on the population’s health.

Some of the enabling factors which will allow Public Health Services to fulfill its functions and achieve its goals are the following:

- Intersectoral partnerships and action.
- Adequate financial and human resources.
- Enhanced information technology, including management information systems as well as a health surveillance system.
- Adequate resources for ongoing professional development related to public health functions.
- Expanded epidemiological capacity.

Public Health Services work cooperatively and collaboratively with variety of partners at the local, district, provincial and national levels. No work is done in isolation or alone.

Given the current social, political and economic context, what are the essential elements of an effective and responsive public health system? Countries and organizations including Canada, Australia, the United States and the World Health Organization (WHO) have considered these questions.

A report in Australia in 2000 built on work done by the United States and WHO. In that report, the scope of a ‘function’ includes processes, practices, services and programs.

Public health functions are a set of activities which protect, promote, or improve health, and prevent illness, injury or disability. The activities may be directed at an entire population, priority sub-populations, or individuals in some circumstances. Public health functions can be carried out by public and private organizations, within and outside the health sector. But the overall responsibility for identifying public health needs, and coordinating and managing responses to these needs rests with governments.

Although public health functions vary around the world, there is remarkable consistency overall.

- In Canada, the Federal/Provincial/Territorial (FPT) Public Health Working Group of the Advisory Committee on Population Health has identified five public health functions as its focus: population health assessment; health surveillance; health promotion; disease/injury prevention and health protection. In Nova Scotia, the decision was made to articulate population health advocacy as a separate and additional public health function.
- The United States, Australia and the WHO have described similar core public health functions and have added public health education/training and quality assurance.

Nova Scotia’s current public health functions reflect a review, synthesis and adoption of the foundational work undertaken internationally.

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- Intersectoral partnerships and action.
- Adequate financial and human resources.
- Enhanced information technology, including management information systems as well as a health surveillance system.
- Adequate resources for ongoing professional development related to public health functions.
- Expanded epidemiological capacity.
As an approach, population health focuses on the interrelated conditions and factors that influence the health of populations over the life span. Population health assessment, therefore, involves the collaborative development and ongoing maintenance of population health profiles, the identification of challenges and opportunities, and the evaluation of public policy and programs to support policy relative to identified concerns and opportunities.

Population health assessment is a responsibility of many partners. The Nova Scotia Department of Health, through community health boards and health authorities, takes leadership in collecting and maintaining information to develop community and population health profiles.

Although population health assessment is the foundational public health function, Public Health Services in Nova Scotia historically haven’t had adequate resources to fulfill this function. To ensure a quality and responsive public health system in Nova Scotia, resources need to be invested in Public Health Services to develop and maintain a system for population health assessment.

A government-wide social policy framework will be essential in ensuring the support (power, resources) for sustainability of this public health function.

Public Health Services Role Relative to Population Health Assessment:

1. To participate in a collaborative process to develop a system for population health assessment which:
   - includes the identification of a common set of indicators based on the determinants of health;
   - aggregates and reports on the data at the community, district, and provincial levels;
   - identifies and reports on trends, challenges, and strengths.

2. To be leaders in communicating the reported information in a meaningful and relevant way so that all stakeholders are engaged and know what action is needed.

3. To work with all relevant partners in jointly developing goals, action and evaluation plans.

OUR ROLES AND RELATIONSHIPS WITHIN THE HEALTH SYSTEM ..... AN EXAMPLE

At the Provincial Level
Helping government officials understand what provincial legislation, policies and programs would improve the health of Nova Scotians. Broader issues and more global population health indicators will be instrumental at this level.

At the District Level
Helping health authorities understand what policies and programs would enhance service delivery to constructively affect the health of populations in their district. At this level, there will be an emphasis on issues and trends supported by concrete data and information.

At the Community Level
Helping community health boards, other community-based organizations and individuals understand the health of the population as well as gaps in the current system that affect the health of the population. Evidence, storytelling and issues identification will be key tools.

ASSESSING THE HEALTH OF POPULATIONS

We work with emergency measures groups to prepare disaster plans.
HEALTH SURVEILLANCE

Health surveillance is a component of assessing the health of populations. It includes the tracking and forecasting of any health event through the collection of data, and its integration, analysis and interpretation into surveillance products, and the dissemination of surveillance products to those who need to know (Laboratory Centre for Disease Control, 1999).

Surveillance activities may include epidemiological research and monitoring of epidemic outbreaks and patterns of communicable and non-communicable diseases, nationally and internationally emerging diseases, intentional and unintentional injuries and exposure to toxic substances or environmental agents harmful to health. Surveillance may also include population screening, case-finding, health surveys, identifying emerging threats to health, the identification of risk, demand for health services and consumer satisfaction.

The Health Surveillance function provides many of the tools that are essential for assessing the health of populations and reporting on health status. Therefore, the basic assumptions are very similar to those for the preceding function.

Public Health Services Role Relative to Health Surveillance:

1. To secure surveillance capability that is suited to the needs of Nova Scotia and that is in harmony with jurisdictions across Canada.

2. To utilize surveillance data to effectively influence population health outcomes.

POPULATION HEALTH ADVOCACY

Population health advocacy aims to:

- strengthen the understanding of governments and populations about the broad determinants of health, and
- gain support for the involvement of government and non-governmental agencies in actions that improve the overall health of populations.

The activities include developing comprehensive inter-sectoral initiatives that significantly impact population health, supporting longitudinal research to build on a foundation of sound evidence about factors that impact health, using evidence to develop public policies that improve the health of populations.

Advocacy is an essential tool because departments other than Health are responsible for policies and practices that influence the determinants of health.

Understanding about population health and determinants of health needs to be expanded. Public Health Services is in a pivotal position to model a population health approach and share information and tools with partners at all levels and across all sectors.

Public Health Services Role Relative to Population Health Advocacy:

1. To build a common language for population health that helps bridge understanding among relevant stakeholders.

2. To work with policy makers across sectors to increase awareness of the impacts of policy decisions on population health.

3. To provide leadership in improving coordination relative to the identification of population health issues and population health strategies.

4. To build mutually supportive relationships with the community health boards and health authorities to impact the health of the population.
Prevention consists of an intervention that has been shown to reduce significantly the likelihood that a disease or a disorder will affect an individual/population or an intervention that disrupts or slows the progression of that disease. Prevention activities include immunization, disease outbreak control, prevention of different types of injuries (intentional and unintentional) in different populations (children and youth, workers, older Canadians), maternal and child health care, prevention of sexually transmitted infections, etc.

Different partners use many strategies to prevent disease and injury. For the most part stakeholders have been working in isolation on disease and injury prevention initiatives. Coordination is needed to strengthen existing efforts. With an investment of human and fiscal resources, Public Health Services is positioned to take a lead role in coordinating chronic disease and injury prevention.

As part of a coordinated approach, capacity building around an evidence-based data collection for chronic disease and injury prevention is needed. These efforts should complement and build on existing data collection systems.

**Public Health Services Role Relative to Disease and Injury Prevention:**

1. To play a leadership role in strengthening partnerships to decrease the incidence of chronic diseases and injury in Nova Scotia.
2. To support and encourage partners to address common risk factors for chronic disease and injury prevention to prevent the onset of disease and injury. Partners include funding organizations as well as those that plan, implement and evaluate intervention initiatives.
3. To advocate for a population health approach in addressing chronic disease and injury prevention.
4. To report regularly on population health status and trends among common risk factors.
Public health uses a population health philosophy in its practice and works collaboratively with many partners.

The traditional work of public health has expanded over the past decades and as knowledge and understanding of the complexities of health are understood, the descriptions of public health functions that support population health have been furthered defined.

These public health functions are inextricably linked and together provide synergy to improve the health of the population.

Public health providers work in roles of supporter, facilitator, leader, mentor, or partner depending on the individual circumstance.

Together, with many, we can work to improve the health of our communities, province and nation.

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REFERENCES

Canadian Public Health Association (December 1997). Public Health Infrastructure in Canada – Summary Document


Federal, Provincial, Territorial Advisory Committee on Population Health (September, 1994). Strategies for Population Health – Investing in the Health of Canadians


Public Health Working Group of the Advisory Committee on Population Health: Terms of reference, October 24, 2000


PUBLIC HEALTH SERVICES OFFICES

For more information about Public Health Services contact one of the Public Health Services offices listed below.

Public Health Services
Serving Colchester, Cumberland and Pictou Counties and most of the Municipality of East Hants

Public Health Services
Colchester Regional Hospital Annex
201 Willow Street, 3rd Floor
Truro, N.S. B2N 4Z9
Phone: 893-5820 Fax: 893-5839

Public Health Services
18 South Albion Street
Amherst, N.S. B4H 2W3
Phone: 667-3319 Fax: 667-2273

Public Health Services
825 East River Road, 2nd Floor
New Glasgow, N.S. B2H 3S6
Phone: 752-5151 Fax: 755-7175

Public Health Services
P.O. Box 104
7 Mill Village Road
Shubenacadie, N.S. B0N 2H0
Phone: 758-2050 Fax: 758-7013

Public Health Services
Serving Colchester Regional Municipality, West Hants and Mount Uniacke

Public Health Services
201 Brownlow Avenue, Unit 4
Dartmouth, N.S. B3B 1W2
Phone: 441-5800 Fax: 481-5803

Public Health Services
P.O. Box 908
Windsor, N.S. BON 2T0
Phone: 798-2264 Fax: 798-5922

Public Health Services
Box 1, Forest Hills Shopping Centre
Head of Jeddore, N.S. B0J 1P0
Phone: 889-2143 Fax: 889-3013

Public Health Services
Musquodoboit Valley Memorial Hospital
Western Shore Acres
Musquodoboit N.S. B0N 1X0
Phone: 384-2370 Fax: 384-3310

Public Health Services
P.O. Box 58
Eastern Shore Memorial Hospital
Sheets Harbour, N.S. B0J 3B0
Phone: 885-2470 Fax: 885-3210

We counsel travelers on immunization requirements.
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<td>258-1920</td>
<td>258-3025</td>
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<td>275, St. Mary's Hospital</td>
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<td>Sydney Mines, N.S.</td>
<td>1-888-272-0096</td>
<td>(Office closed, please call above number)</td>
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We provide training and support for health promotion activities.
PUBLIC HEALTH SERVICES

WHO WE ARE, WHAT WE DO