

## **Community Windshield Survey and Assessment**

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NURS 3551: Experiential Learning Lab V

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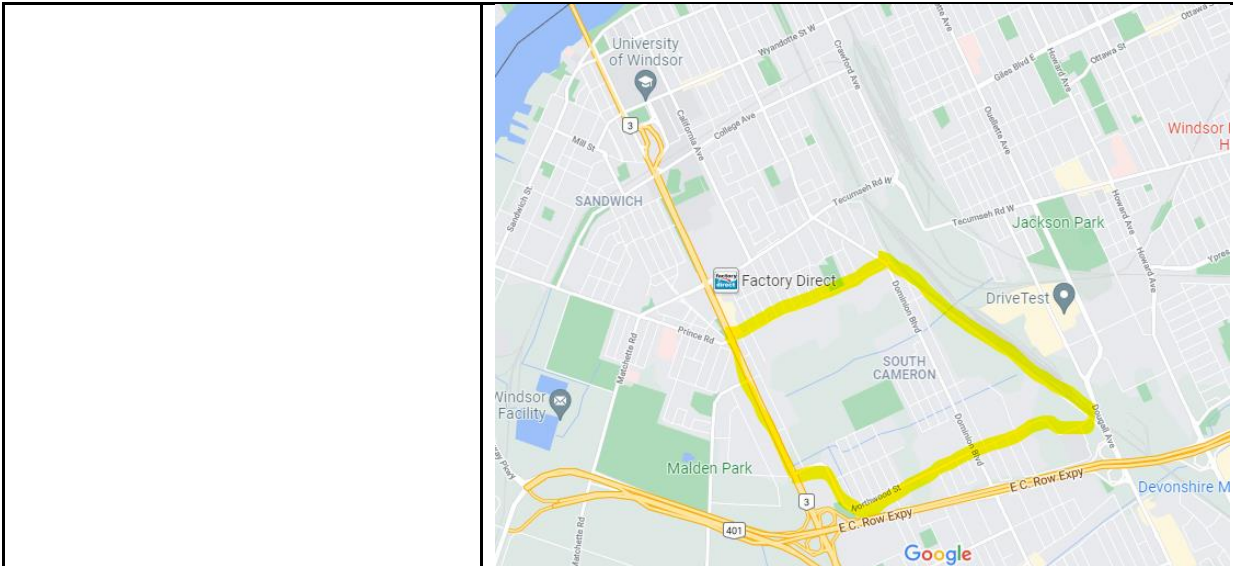
December 1, 2021

## Windshield Survey & Community Assessment

**Group Members:** Reem Boudali, Luisa Hurtado, Brett Parent, Paulina Proгри

**Times/Dates of observations:** November 13 (1200), November 24 (1500), November 27 (1400)

Community Assessment Element	Information gathered from observations in your chosen community:
<p><b>What makes your community a community? (see Chapter 13)</b> Provide the rationale for your choice of community. What are the boundaries?</p>	<p>The community we chose is in the Southwest region of Windsor. As shown in Figure 1., the area was bounded by the following streets: Huron Church Road (West border), Totten Street (North border), South Cameron Boulevard (East border), and E.C. Row Expressway (South border). According to Stamler et al. (2020), a community is “a group of people who live, learn, work, and worship in an environment at a given time” (p. 250). As such, we chose the South Cameron community because, at a glance, it has many homes, schools, and places of worship. These facilities provide spaces for the members of this community to interact and carry out their daily functions. The community is also extremely diverse in its population, so we were curious to see what features would accommodate their needs and where there was a lack of available support.</p> <p><b>Figure 1.</b> <i>Map of selected community highlighted</i></p>



<p><b>Community Core</b></p>	
<p><b>1. History:</b> what can you learn about the history of the community by observing (e.g., old, established neighbourhood, new subdivision) the built environment? Does the community look like it is thriving or fallen on “hard times”?</p>	<p>From observation, much of the neighborhood seems to be established with some older areas. Many homes appeared to be older—from the late 1900s (80s, 90s, etc.). Some blocks, such as the areas behind Holy Names High School moving towards Huron Church Road appeared to be newer subdivisions. This assumption is based off the fact that many of the houses in the area were larger and built with more modern-looking styles. There were also empty plots of land and construction throughout this area, indicating that new houses were being built. While these areas seemed to be thriving, other areas seemed to have fallen on hard times. Streets like Longfellow Avenue and many of the side roads branching off Totten Street seemed worn out and filled with potholes, while streets like Dominion appeared to be recently paved over. Another indicator of hard times was graffiti on the side of the convenience store on the corner of Dominion and Totten.</p>
<p><b>2. Demographics:</b> what sorts of people do you see? Young? Old? People who are homeless? Alone, families? People with visible disabilities? Is there anyone you would not expect to see? Are there signs of poverty or wealth? Is the population homogenous?</p>	<p>Many of the people we saw were families. This makes sense due to the large number of schools in this community: Northwood Public School, Holy Names High School, École élémentaire catholique Saint-Edmond, École secondaire catholique E.J. Lajeunesse, École Secondaire De Lamothe-Cadillac, and Maranatha Christian Academy. We observed multiple individuals with disabilities on multiple drives through the neighborhood. On one occasion, we saw individuals in wheelchairs at a home on the corner of Longfellow Avenue and Ojibway Street. Upon further investigation, we found that there was an assisted living home there</p>

	<p>that accommodated individuals who are differently abled. The other time we drove at the end of the school day, we saw a special school bus that was made specifically for students in the special-needs classes at Northwood Public School. These students appeared to have a mix of mental and physical disabilities and were accompanied by staff in marked vests. In the end, there wasn't anyone who we did not expect to see; everyone we observed seemed to belong in the environment.</p> <p>As previously mentioned, the new subdivisions seem to have more wealth as the houses in these areas were bigger and newer. On the other hand, the area that showed signs of poverty was the area around Totten Street. These houses were smaller and appeared to look the same as one another. Many of the houses were Windsor Housing, which is city housing. These are connected homes that are for families of lower incomes.</p> <p>Overall, the population was not homogenous. While many of the people were apart of families, we observed many older individuals as well. After talking to one of the residents, we learned that there is a lot of elderly in the area because people in this area have lived here for a long time and oftentimes, people stay in their homes after their children grow up and move out with their newly formed families (K. Siafa, personal communication, November 13, 2021).</p>
<p><b>3. Ethnicity:</b> Are there indicators of diversity e.g., restaurants, festivals? What signs do you see of different cultural groups?</p>	<p>There are many signs of diversity around the community. The most obvious sign was seeing the people who were outside. There were lots of variations in skin tones and dress (e.g., abayas and hijabs). Many of the homes were embellished with cultural décor or flags from other countries. There was also a Filipino Community Center located on Northwood Street. One of the homes we passed by even had a lawn sign for the Carrousel of Nations still up. The festival takes place annually in the summer and celebrates the multiculturalism of Windsor (Carrousel of Nations, 2021).</p>
<p><b>4. Values and beliefs:</b> Are there churches, mosques, temples? Does the homes look well cared for? With flowers, gardens, signs of art? Culture, heritage? Historical markers?</p>	<p>There were many religious centers in the area including Muslim mosques (Windsor Mosque, Windsor Islamic Association Centre), Churches (The Gathering Church, Grace &amp; Truth Chapel, Price Memorial Church, West Side Church of Christ), Hindu Temple/Mandir (BAPS Shri Swaminarayan Mandir), and Jewish synagogue (Beth El Windsor).</p>

	<p>Due to the weather/season, we did not see gardens or flowers, but houses and lawns were generally well-maintained (green and trimmed). Some houses had lights and decorations out for Christmas. There were no obvious historical/heritage markers probably because it is a mostly residential area.</p>
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<b>Subsystems:</b>	
<p><b>5. Physical Environment:</b> how does the community look? What do you note about air quality, flora, housing, space, green areas, animals, people, natural beauty, water, climate? Physical environment of the community and the community setting considering, roads, infrastructure, housing type, sanitation, condition of buildings, accessibility? What sounds do you hear?</p>	<p>The community looks like most residential neighborhoods: most streets are lined with houses and connect to a main road (Dominion Boulevard). The South Cameron community also has many forested areas. The South Cameron Woodlot is the biggest example. It is home to many trails, streams, and wildlife like deer. The border of South Cameron Boulevard was connected to a large, undeveloped plot of land and forest that seemed to be overgrown with long grass and various wild plants. Due to the proximity of the homes to these forested areas, residents reported that sightings of wildlife in their yards including wild turkeys is a regular occurrence (M. Ahmed, personal communication, November 27, 2021).</p> <p>Nothing abnormal was noted about the air quality. The weather was cold on most days we did our survey, even snowing on one of the days. The area was generally quiet in the neighborhoods away from the main roads; the only distant sounds were cars, school bells, and kids playing.</p>
<p><b>6. Communication:</b> Are there common areas where people gather? What newspapers do you see for sale? Do people have TVs, cell phones etc.? What do they listen to? What are formal and informal means of communication?</p>	<p>There were many common areas for people to gather including school grounds, playgrounds, and community centres. We observed small groups of people either entering these areas like the mosque or walking along the sideways in the direction of one of the many park/playgrounds. For more formal events, many of the community centres in the area have halls available for rent and some of the schools offer the same with their gym spaces.</p> <p>We did not happen to observe anyone during our observation periods using a cell phone because most people we saw outdoors talked with whoever they were walking with. We did note some TVs turned on in homes that had curtains drawn back. These people watched anything from sports to game shows.</p> <p>We gained more insight into some of the communication methods from one of the residents. She</p>

	<p>explained that for her, she obtains most of her local information from the radio on her morning commutes to work. She either listens to CBC Windsor (97.5 FM) or AM 800 (M. Ahmed, personal communication, November 27, 2021). Another informal method of communication amongst the community is the use of social media. <i>Nextdoor</i> is an app that allows users to register based on your local community (Nextdoor, 2021). It allows residents to make posts and connect to their neighbours. M. Ahmed explained that she received a letter in the mail with an invite code notifying her about the app. She also elaborated that many neighbours would post requests like snow shoveling or will warn others about suspicious activity. On top of specific apps like <i>Nextdoor</i>, there are many groups on other social media platforms like <i>Facebook</i> (Patton, 2021).</p>
<p><b>7. Economy:</b> Is it thriving community? Are there industries, stores, places for employment? Where do the people shop? Are there signs that people can find employment? Are there signs of thrift stores, pawn shops and other services for people with financial concerns?</p>	<p>While the members of the community seem to be well-off, there aren't many stores within the area as most of it is a residential area. Based on our observations, it seems that most people commute out of the area for work. There were a few stores, such as a pet portrait small business based in the owner's home (found on a side street near Northwood School).</p> <p>Along Huron Church Road, there are plenty of businesses, mainly grocery stores (FreshCo, Food Basics, etc.). While within our boundaries there were no thrift stores, pawns shops, or indications of services for people in financial need, the community is right next to E. C. Row Expressway that allows for a quick commute to virtually anywhere in the city. This allows residents to access services they may need with a short drive (5-10 minutes on average).</p>
<p><b>8. Education:</b> Are there schools, a university, technical institutions, art education in the area? How do you they look? Are there libraries? Is there a local school board? Are there adult education and ESL programs available?</p>	<p>As previously mentioned, there are many schools in the area. Northwood Public School is an English, public-speaking school under the Greater Essex County District School Board. Holy Names High School is under the Windsor-Essex Catholic District School Board. Maranatha Christian Academy is a private institution. The rest of the schools all fall under the local French school board. All look well-maintained with some having additions (portable classrooms on the school field) made to accommodate a growing student body. We were unable to find whether any of these schools offered adult education; however, we did learn that Northwood does have an ESL program because</p>

	<p>they receive a lot of students who immigrate here (M. Ahmed, personal communication, November 27, 2021).</p>
<p><b>9. Health and Social Services:</b> Are there health services such as hospitals, physician offices, dentists, public health, and home health agencies? Social services like social assistance, food banks, childcare, shelters? Mental health services?</p>	<p>The only health service we were able to locate within the area was a single physician’s office located on Totten Street near Huron Church. The nearest urgent care centre is Grand Marais Urgent Care Clinic which is a two-minute drive from the South border of our selected community. Windsor Regional Hospital on Ouellette is about a 10-minute drive away while the Metropolitan campus is 10-15 minutes away.</p> <p>There were no indications of any social services being offered; however, one resident reasoned that many religious organizations offer these services to their members and gave Windsor Mosque’s ISWA program as an example (K. Siafa, personal communication, November 13, 2021). ISWA offers social welfare assistance “ranging from child protective CANS, family discord, newcomer settlement, foster care, seniors' program, food bank, youth counseling, new Muslim's support, inmate support and rehabilitation” (Windsor Islamic Association, n.d.).</p>
<p><b>10. Politics and Government:</b> Are there signs of political activity? E.g., posters, meetings? What party affiliation predominates? What is the government jurisdiction of the community? Are people involved in the decision making in their local government unit?</p>	<p>Due to the time of year, there were no upcoming elections. Hence, we did not see any campaign materials around the area. Talking to various residents, we discovered that Brian Masse is the Member of Provincial Parliament for the area and that he and his party (New Democratic Party) have been elected for Windsor West for many years now. When asked why Brian Masse, these residents argued that he has been very involved in local affairs and is easy to approach regarding personal/communal concerns.</p> <p>Despite this attitude of advocacy and initiative towards concerns, one community member felt that this community is not very active in local government decision-making. For example, many of the residents complain that Longfellow Avenue and many other roads have not been paved, but when she put an effort to gain the signatures of everyone on the street as is required by the city council, not everyone wanted to assist (K. Siafa, personal communication, November 13, 2021).</p>
<p><b>11. Recreation:</b> where do children play? What are the major forms of recreation? Who participates? What facilities for recreation do you see? Are they in good order or disrepair? What about performing</p>	<p>There are many playgrounds/parks for children to play at: Balsamo Park, Superior Park, Treehouse Park, Ojibway/South Cameron Park, Aboriginal Park, and more. The younger children often played on the slides or swing sets, while the parents would sit on nearby benches to supervise their kids. A lot of</p>

<p>arts and social and other leisure activities? Museums, zoos, sports teams? What is the affordability of recreational services?</p>	<p>adolescents would play sports. The field beside St. Edmunds (Superior Park) appeared to be the most popular playground out of all the various sites, most likely due to the fact that it had the most variety of services (open field, basketball, playground, paved walking trail). All these parks were free for public use. We were unable to find any evidence of performing arts or other leisure activities, such as museums or zoos, offered in the area. There is a Fit4Less gym in one of the Huron Church plazas; the membership cost is \$5.99 every 2 weeks (Fit4Less, 2020).</p>
<p><b>12. Transportation and Safety:</b> How do people get around? What types of private and public transportation is available? Do you see buses, bicycles, taxis? Are there sidewalks, bike trails? Is getting around in the community possible for people with disabilities? What types of protective services are there? E.g., fire, police. Are the roads safe? What is the traffic like?</p>	<p>The most common method of transportation in this area appears to be private vehicles. Most driveways had one or two cars, and occasionally we would see houses with more. The Dominion 5 bus passes through the neighborhood and goes towards the University of Windsor campus, so we can assume that many students utilize that service. Travel on foot and by bike were observed but appeared to be more so for leisure than necessity. There are many trails and bike lanes nearby. For example, there is a paved trail in the South Cameron Woodlot. There is also a bike trail that is located near South Cameron Boulevard and Dougall; it is paved and has a special station with tools to fix bikes.</p> <p>For individuals with disabilities, there does seem to be some accommodation for safe travelling including verbal commands and braille writing at the Dominion/Northwood stoplight for those who have hearing or vision impairments. There is also lots of signage around the school for cars to slow down, which makes it a safer environment for all individuals. Despite these efforts, we observed some potential hazards such as uneven sidewalks that could cause issues for those in wheelchairs. Windsor Fire Station 5 is located on the corner of Northwood and Daytona, near Huron Church Road. There is also an EMS station near the intersection of South Cameron Boulevard and Dougall Avenue.</p> <p>There was practically no traffic on our November 13 and 27 drives; however, there was an incredible amount on November 24. This is because we encountered traffic from Holy Names, Northwood School, and Lajeunesse at the end of their school days. The Northwood/Dominion and Northwood/Longfellow intersections were practically at a standstill. When we drove up Longfellow Avenue, we observed cars parked on both sides of the road (with some cars on the</p>



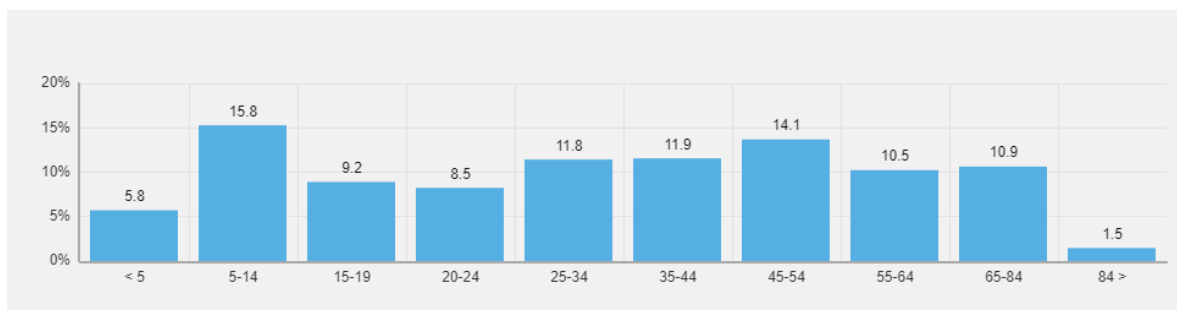
	sidewalk). This was dangerous because Longfellow Avenue is barely a two-lane street. To pass the parents who were parked waiting to pick up their kids, we had to merge into the lane of oncoming traffic and drive around all the parked cars until we were able to move back to the proper lane.
<b>Community Resident Interviews</b>	
<p>Using sources from the television, radio, print and electronic media find one or two articles that are relevant to your community, which include comments from community residents. You can use media sources for this section only! Remember that you will need to cite and reference your sources. (The issues identified here may or may not be one of your priorities after your analysis)</p> <p><b>What issues were identified? Which social determinants of health (SDOH) are reflected?</b></p> <p>The first article we found discusses the aftermath of a major flood in Windsor in 2017. It featured the thoughts of a South Cameron resident, Sandra Coates. Sandra explained she had to have her son come and help her, but that by the time he arrived, there had been so much damage already (Robert, 2017). Because there were so many other homes being flooded, it was nearly impossible to buy a pump in the whole city. City helplines and emergency services were back up, so many people were left to figure things out on their own (Robert, 2017). This flood was a direct danger to citizens' health because it was sewage water, which is not clean. This can cause infection and sickness. The flooding leaves a lot of other issues such as cleanup, construction to fix damage to the physical environment, and a lot of financial burden when it comes to replacing items. Such a dilemma can cause stress and affect normal family functioning and coping skills. For example, if a family's basement was flooded, the kids who may have been sleeping in the basement must relocate and potentially share rooms with the parents, indirectly causing clashes.</p> <p>Another relevant issue was regarding the South Cameron Woodlot. As previously mentioned, the woodlot is a large, forested area that houses many animal and plant species. However, there is debate on whether the area should be developed for residential or commercial use. Over 2000 residents signed a petition urging the mayor to protect the area (Pinto, 2019). Nancy Pancheshan of the Save Ojibway group noted that wetlands like the South Cameron woodlot are not only home to lots of wildlife, but they have advantages like decreasing flooding—a topic that has caused issues for the community in the past (Pinto, 2019). The same SDOH as the flooding applies to this situation.</p>	
<b>Epidemiological Data</b>	
<p>Provide five types of demographic/epidemiological data, as well as the actual numbers (e.g., age range, income, education, health status) that are particularly important for your assessed community. Remember that you will need to cite and reference your sources.</p> <ol style="list-style-type: none"> <li>1. Age ranges (AreaVibes, 2021) <ul style="list-style-type: none"> <li>• Median age 33.7</li> <li>• Age Breakdown (See Figure 2.) <ul style="list-style-type: none"> <li>○ &lt;5: 5.8%</li> <li>○ 5-14: 15.8%</li> </ul> </li> </ul> </li> </ol>	

- 15-19: 9.2%
- 20-24: 8.5%
- 25-34: 11.8%
- 35-44: 11.9%
- 45-54: 14.1%
- 55-64: 10.5%
- 65-84: 10.9%
- >84: 1.5%

**Figure 2.**

*South Cameron Age Breakdown*

### South Cameron Age Breakdown

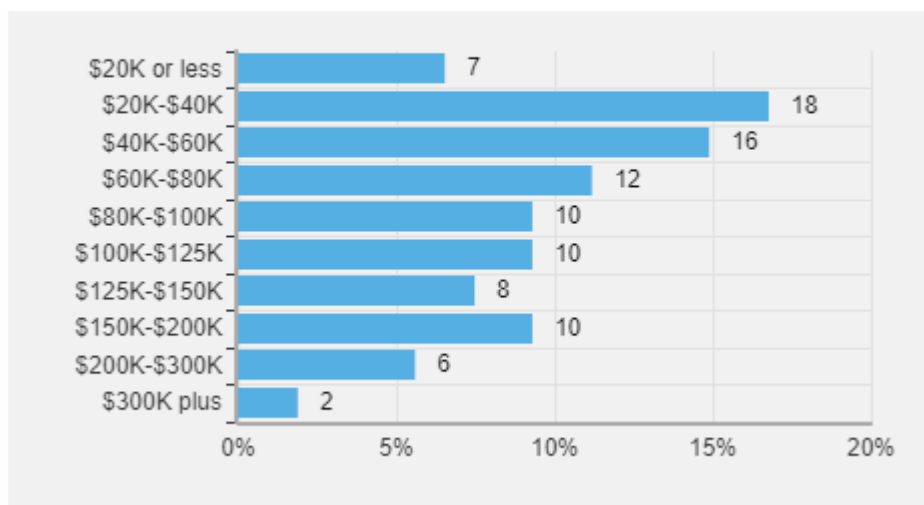


### 2. Income (AreaVibes, 2021)

**Figure 3.**

*South Cameron Household Income Distribution*

### Household Income Distribution



### 3. Education (AreaVibes, 2021)

- Test scores: 18% higher than the national average
- 80.7% of population completed high school
- 31.5% of population has a bachelor's degree

4. Crime rate: 32% lower than the Windsor average (AreaVibes, 2021)
5. Cost of living: 4% higher than the Windsor average (AreaVibes, 2021)

**What does this information tell you about the relevant SDOH for this community?**

This information further supports that the South Cameron community is mainly composed of families; Figure 2. showed similar percentages for all age groups. The statistics on income show that the community is a middle-low class group. This is slightly concerning considering the increased cost of living in the area. The overall safety and quality of the education makes it a great community for children to grow and learn; however, many adults do not pursue post-secondary education, which can be an issue with obtaining a job of stable income to support their families. In the lens of health, the level of education can have effects on health literacy. This can affect how adults navigate health care and their ability to be proactive with their own health and make healthy decisions (ABC Life Literacy Canada, 2021). In summary, the relevant SDOH for this community are income, social status, education, and healthy child development.

Observations (windshield survey), interviews and epidemiological data are the three elements of a community assessment. For the purposes of this assignment, we are not asking you to conduct any interviews.

**How did your observations, epidemiological data and media interviews combine to strengthen your analysis?**

Observations allowed us to get general and objective data of the community. This data helped us to make subjective assumptions during our analysis to think about some potential issues with the community. Observations fail in the sense that they do not provide a complete image of the community. The information we gathered was in part based on luck; if an incident happened during the time we were driving by, we were aware of it. However, there is still a lot of information missing because we are not all residents of this community. For example, we may not know about how the community functions in the summer when there is no school because our observations were during the winter. Interviews with residents, epidemiological data, and other media resources helped bridge that gap. It provided us with more experienced perspectives and brought issues to our attention that would have been impossible to know upon simply based on observation. For example, we wouldn't have known that many of the community members use the *Nextdoor* app, unless we had had that conversation with one of the residents. Another great advantage of it was that it helped us prioritize needs; we were able to know which interventions would be more useful for the population.

## Community Nursing Process & Care Plan

### **Identify Client (Community)**

The clients being assessed are the families residing in the South Cameron region. This excludes the population that visit or work in the designated area, and instead just features residents.

### **Significant Assessment Data (What was especially significant from the Windshield Survey?):**

After assessing the data, something that was significant from the Windshield Survey was the amount of elderly people that lived in the community. As shown in Figure 2., 12.4% of the South Cameron population is over the age of 64. This population is significant to the data because the population is more at risk of developing health problems. Moreover, we found that there were a handful of students with mental and physical health disabilities. This population is significant to our data because it provides a focus towards inclusion and compensation to meet the needs of these students. The rate of students who complete a bachelor's degree is alarming. There is a 49.2% decrease when comparing the rate of high school diplomas to bachelor's degrees. The final major finding was regarding the diverse religions of the community and the plethora of religious facilities (churches, mosques, synagogues, and Hindu temples). With the many religious facilities, it is evident that spiritual care has a tremendous influence on the health of the community and needs to be considered in community nursing care.

### **Any gaps in data collection?**

There were minor gaps in the data collection process. The first gap was the language barrier of some members in this community. When trying to speak and interview some participants, it was hard to understand without attentive listening or translation of a foreign language. The second gap was having to drive into the neighborhood at different time periods. This was required so that we could observe different functions, such as school endings or lunch. The final gap was not going at nighttime. Not going through the neighborhood limits us to only knowing what activities occur during the daytime. There may be different gatherings, such as parties, or an alternative economic focal point (e.g., bars, clubs) at later hours in the community. Future research should attempt to assess the community's function and needs at these missed times and even at other times of the year (e.g., summer).

### **Assessment of Needs (including Readiness, Facilitators, Barriers and Environmental Considerations)(include important SDOH – remember these can have a positive or negative effect on health)**

There are needs in the community that must be met by the nurse. There is a need for environmental safety with flood control. From the interview, the residents seem to be ready to help this adequate shelter need because of how urgent they made the need seem. Facilitators that help towards meeting these needs are small organizations, such as the small physician clinic within the territory. It is evident that more of these types of services need to be provided in order to keep positive health amongst the people.

Barriers that may prevent adequate health are the amount of income and education provided to the young. Most of the houses are renovated and well-kept, but there are instances where a lack of income or poverty, such as by Totten Street, prevents opportunities and therefore, good health outcomes. Also, many of the adolescences do not achieve post-secondary diplomas due to the income deficit and other miscellaneous reasons. The amount of education milestones hit must be raised in order to facilitate the meeting of some of these

needs, thus providing positive outcomes in the neighborhood. Moreover, an environmental consideration we found is the uneven sidewalks throughout the community. It is important to fix these sidewalks in order to prevent any injuries for pedestrians and those in wheelchairs.

**Client (Community) Concerns and Risks:**

The elderly can be at risk of impairment in activities of daily living, malnutrition, medical comorbidities, and cognitive impairment. Some concerns for the elderly are unsanitary housing, lack of social networking, and living alone. Students with mental and physical health disabilities may be at risk of experiencing abuse more than those without disabilities, physical inactivity, and poorer overall health. A concern for this community is less access to adequate health care.

Moreover, other community concerns are the abundance of traffic and lack of health and social services specific to the area. Traffic within the community is a safety issue as clients may not look both ways before crossing the street or have to drive where the oncoming traffic lane was to bypass the parents waiting to pick up their kids on Longfellow Avenue.

Additionally, the lack of health and social services within the area can be a concern because it forces people to have to commute to other communities.

**Client (Community) Strengths and Resiliencies:**

During our visits to the community, we discovered that their strengths were their elementary and high school education, communication platforms, and parks. The community has many school options for parents to decide where they would like to send their children such as Northwood Public School, Holy Names Highschool, Maranatha Christian Academy, and multiple French schools. Additionally, according to AreaVibes (2021), the South Cameron community has about 18% higher test scores than the national average. Moreover, the community uses different communication platforms such as *Nextdoor* and *Facebook*. Lastly, there are many parks and playgrounds within the community such as Superior Park, Balsamo Park, Treehouse Park, Aboriginal Park and many more which can help residents to stay fit.

**Client's (Community) PRIORITY care needs (Identify 3):**

**At least one must be strength or wellness-based**

1. To motivate grade 12 students to attain post-secondary school.
2. The elderly are at risk of developing medical comorbidities.
3. Increased risk of motor accidents due to heavy traffic

**Priority Diagnostic Statements: Actual, Risk, or Wellness**

**At least one diagnosis must be strength or wellness-based**

(See Table 13.2 in Chapter 13)

*Response related to Focus and Etiology as evidenced by Defining Characteristics*

	<b>Response/Issue Description</b>	<b>Focus</b>	<b>Etiology</b>	<b>Defining Characteristics/</b>

	<b>(risk, concern, strength, state)</b>	<b>(boundaries of the population segment of interest)</b>		<b>Manifestations</b>
1	Concern for students' motivation to attain a bachelor's degree despite strong elementary and secondary school education	High school students living in the South Cameron community	Related to adults in their family not pursuing a post-secondary education	As evidenced by the 80.7% high school graduation rate, but only 31.5% of population with a post-secondary degree and low socioeconomic class of the area's population.
2	Risk for poor health outcomes	Elderly residents of South Cameron community	Related to social isolation and barriers to accessing care	As evidenced by lack of health and social services specific to the area, requiring residents to commute outside of South Cameron for care, as well as a lack of activities geared towards the older population.
3	Risk for motor vehicle crashes and injuries	School-aged children and adolescents	Related to increased traffic due to the high number of schools in the area	As evidenced by the seven schools in the area with high attendance (e.g., Northwood ~1000 kids) and our experiences being stuck in school traffic: children not looking both ways, cars blocking sidewalks and

				lanes, and parents not obeying traffic laws in area.
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<b>Goal Statement SMART (with Date)</b>	<b>Interventions (3 at minimum) (What actions should the nurse do to achieve the goals; One must be a population health education intervention)</b>	<b>Rationale (What is the evidence behind why you are doing this intervention? Cite and reference your sources)</b>	<b>Evaluation Progress with evidence; How you would evaluate. (Was Goal Met, Unmet, Ongoing)</b>
<b>Short-term Goal</b>  The client will be safe from any motor vehicle accidents and injuries by the end of their school day on December 17 <sup>th</sup> , 2021.	The nurse will educate young children on safety habits regarding crossing of the road through song and roleplay.	Educating young kids on the healthy road habits and rules of crossing the roads from a young age can greatly help minimize and prevent injuries throughout their life (Carpenito-Moyet, 2013).	Ongoing – Goal would be considered “Met” when there are no accidents or school traffic injuries reported for Northwood Public School in South Cameron on December 17 <sup>th</sup> , 2021.
	The nurse will teach the kids and parents measures to prevent accidents such as allowing enough time to cross streets.	Educating the parents can in turn help educate the children, as well as make sure they stay consistent with following the safety guidelines (Carpenito-Moyet, 2013). Therefore, it is important to include the parents as well.	Ongoing – Would be evaluated by parents and students starting to allow enough time to cross the streets and there being less chaos on sidewalks and traffic lights during peak school crossing hours.
	The nurse will teach the kids and parents/guardians about distracted driving such as cell phone use, texting, eating and adjusting radio.	The less distractions on the road, the fewer potential accidents and risks for unsafe driving conditions (Carpenito-Moyet, 2013), therefore informing the parents of healthier habits and safer alternatives, this can ultimately form a safer community.	Ongoing – Would be evaluated by less distracted driving in the area of South Cameron, as a result of these parents/guardians following stricter measures.

	The nurse will work in collaboration with the schools and local government to identify resources (crosswalk guards, increase number of stop signs, etc.) that can regulate and organize traffic during peak hours.	School crossing walk guides help children cross the road safely before/after school and are a visual marker for drivers to drive carefully in such areas (City of Toronto, 2021)	Ongoing – Would be evaluated based on the incoming and outgoing traffic levels to see whether the numbers become more spread out (cars are entering the area and leaving at almost an equal rate; they aren't being held up due to decreased traffic) rather than clustered at the peak time
<p><b>Identify the levels of prevention (primary, secondary, tertiary) in your interventions for this goal:</b></p> <p>Our interventions for this goal are at the primary prevention level as they focus on teaching and education of principles on our client population which in this case are the residents of South Cameron with an emphasis on adolescent, children and their parents/guardians. The reason why primary prevention is best is because we want to prevent these incidents from occurring at all, rather than treating children with injuries after an accident. Through teaching and collaboration with the school to ensure both students and their parents are willing to take part in the care, motor vehicle accidents and the risk of injury in the area can be greatly reduced.</p>			
<p><b>Short-term Goal</b></p> <p>The children and adolescents who need it, will correctly verbally state or physically demonstrate the steps of safely crossing the road by December 13<sup>th</sup>, 2021.</p>	The nurse will create workshops in groups throughout the day at Northwood Public School in South Cameron on December 10 <sup>th</sup> , 2021 and educate each classroom on safety and the rules of safely crossing the road. On December 13 <sup>th</sup> 2021, the nurse will return to evaluate the students stating the rules of safely crossing the road.	One of the most essential and basic safety aspects is crossing the streets and roads. Therefore, it can be an ideal intervention to have children learn these rules of safely crossing the streets (Carpenito-Moyet, 2013). This can also ensure this becomes a habit and is something that is made to be fun and engaging to learn.	Ongoing – Can be evaluated by the children stating or demonstrating the rules of crossing the roads correctly on December 13 <sup>th</sup> , 2021, when the nurse returns.
	The nurse will educate the students on why it is so important to learn	Especially when it comes to interacting with children, it is important to tailor concepts to their	Ongoing – Would be evaluated by the students being able to watch the video with the nurse and



	the rules of safely crossing the road, through having them watch a safety video tailored to kids.	level of learning and understanding (Carpenito-Moyet, 2013), if we want them to comprehend any of the concepts. If the students do not understand why safety is important, they will not value, retain, or put the information learned into practice.	enjoying themselves. A discussion could then be held to ask the students for their thoughts to see their own rationale on the importance of road safety.
	The nurse will remind parents/guardians of the rules of safely crossing the road by sending a reminder about general safety while driving, in a letter home with their children.	When the parents/guardians of the children are involved, the children are more likely to follow in their footsteps and actions by seeing what the people around them are doing, therefore it is important to include all aspects of the community and not only the children. This also provides support to caregivers of the client (children, adolescents) on what is expected of them (Carpenito-Moyet, 2013).	Ongoing – Would be evaluated by the parents/guardians receiving their reminder letters at home brought by their children, and acknowledging the material written on it by signing it and sending it back to the school or community health nurse.
<p><b>What Ottawa Charter action strategies are used in the interventions for this goal?</b> (Hint: see Figure 8.2 in Chapter 8 of your community theory textbook).</p> <p>There were a few Ottawa Charter action strategies used in the interventions for this goal. The first one is Develop Personal Skills through the children learning and reciting the rules of crossing the road. The second is Strengthen Community Action by sending out the reminders home with the children. The third is Create Supportive Environments, through the nurse educating the children why it is so important to be safe while crossing the street (Stamler et al., 2020).</p>			
<p><b>Long-term Goal</b></p> <p>The school community will learn how to be safer by not having any motor-vehicle</p>	The nurse will create educational pamphlets to distribute within the community for both children and adults. These pamphlets can be teaching them the rules of safely crossing the road and certain traffic	Handing out educational material like pamphlets or brochures, can ensure that the target population has a resource they can look back on and access if needed (Carpenito-Moyet, 2013), and they have this to use in the future.	Ongoing – Would be evaluated by the target populations receiving the pamphlets (both children and adults), and these populations following the rules and safety tips on the brochures, in turn avoiding potential traffic accidents and pedestrian injuries.

accidents the rest of the school year until June 2022.	rules for pedestrians such as looking both ways.		
	The nurse will develop a course to teach kids, adolescents and anyone else who may benefit, how to identify hazards in traffic and roads, and how to avoid unsafe situations.	A mandatory course in which a school or community health nurse comes in and speaks to school-aged children and adolescents about hazards in traffic and how to identify and avoid these potential risks, would greatly benefit the community (Carpenito-Moyet, 2013). This can also be done for members of the community who do not fit into the categories above, and special sessions can be held for other members and promote this further into the community.	Ongoing - Would be evaluated by the kids, adolescents and students being able to identify the hazards of the roads and how to avoid unsafe situations by engaging in a discussion at the end of the course in which everyone participates and shares what they will do differently going forward.
	The nurse will speak with bus drivers and their companies to ensure they are also following maximum safety guidelines and all the rules of the road to prevent accidents from occurring in the South Cameron community.	As a community nurse, it is important to acknowledge all the parts of the community which can contribute to better health outcomes and solutions to public concerns (Carpenito-Moyet, 2013), and in this case, the bus drivers must also be held accountable to ensure they are doing their part when operating these big vehicles.	Ongoing – Would be evaluated by the bus drivers consistently following the rules of the road and school zone guidelines when operating school buses, in turn reducing accidents in bus zones.

**What primary health care principles are included in this goal?**

The primary health care principles included in this goal are equitable distribution when it comes to involving everyone in the population involved in the problem, as a part of the learning and the solution for a better traffic environment for all. The services offered to the community by the nurse were also preventative and promotive, since the education surrounded traffic and school zone safety for students, bus drivers, staff and parents/guardians alike (Stamler et al., 2020).

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