A WELLNESS Strategy for New Brunswick

Second Report of the Select Committee on Health Care

April 2001
SECOND REPORT
OF THE
SELECT COMMITTEE ON HEALTH CARE

Working Together for Wellness
A Wellness Strategy for New Brunswick

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Third Session
Fifty-fourth Legislative Assembly
of the
Province of New Brunswick
May 1, 2001

To The Honourable
The Legislative Assembly of
The Province of New Brunswick

Mr. Speaker:

I have the pleasure to present herewith the Second Report of the Select Committee on Health Care.
This report is the result of your Committee’s deliberations on developing a wellness strategy for New Brunswick, referred to your Committee by Hon. Dennis Furlong, Minister of Health and Wellness.

The First Report of the Select Committee on Health Care: Wellness Strategy Progress Report, was submitted in June 2000. The report included a first look at health and wellness related policies across government and contained an inventory of government programs that impact on health and wellness.

In the fall of 2000, public hearings were held throughout the province, giving New Brunswickers the opportunity to provide their views and suggestions on wellness. The Committee heard over 90 presentations and received over 40 additional written briefs.

The Committee has considered the valuable input received and is pleased to offer this Wellness Strategy Report to the Legislative Assembly. The report provides a Strategic Framework for Wellness, including Key Elements of wellness, Priorities for Action, Strategic Aims and Objectives. The Committee’s recommendations address the challenge of how we can place more emphasis on promoting wellness, preventing illness, and addressing the factors that influence wellness, to help New Brunswickers stay healthy longer.

This report, together with the Committee’s First Report, effectively concludes the work of the Committee as it relates to developing a wellness strategy.
On behalf of the Committee, I wish to thank the many individuals and organizations that appeared at the public hearings or submitted written briefs. The Committee recognizes the significant contribution of the many organizations that work with individuals and families affected by illness to improve their health and quality of life. This support has a significant impact on the ability of the Province of New Brunswick to sustain an affordable health care system in the future.

I also wish to thank the various government officials that participated in the process and provided valuable information to the Committee. In particular, I wish to thank the Committee resource person, Ms. Donna Mulholland, for providing professional and knowledgeable assistance and advice throughout the process.

Finally, I must express my appreciation to the members of the Committee, and to the other Members that have participated in the process, for their contribution in carrying out this important aspect of our mandate.

And your Committee begs leave to make a further report.

Respectfully submitted,

Madeleine Dubé, MLA
Chairperson
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EXECUTIVE SUMMARY

At the request of the Honourable Dennis Furlong, Minister of Health of Wellness, the Select Committee on Health Care has reviewed and consulted with New Brunswickers on the issue of wellness. The Committee is pleased to offer Working Together For Wellness: A Wellness Strategy for New Brunswick to address the challenge of how we can put more emphasis on promoting wellness, preventing illness, and addressing the factors that influence wellness, to help New Brunswickers stay healthy longer.

The Committee recommends endorsement of the definition “Wellness is a state of emotional, mental, physical, social and spiritual well-being that enables people to reach and maintain their personal potential in their communities” and endorsement of the complementary concepts of health promotion, primary prevention and the determinants of health.

The report explores individual, family, community, government and shared responsibility for wellness. The Committee believes that “wellness is everyone’s responsibility” and that working together is key to improving the wellness of New Brunswickers. The report briefly examines the health of New Brunswickers, and also cites the many benefits of wellness. Notably, although wellness is not the lone “magic bullet”, it is essential to the future affordability and sustainability of our health care system. We need to focus more effort “upstream” with a preventive approach that keeps us healthy, instead of just focusing “downstream” on the health care or illness system.

To achieve our goal of helping New Brunswickers stay healthy longer, the Committee recommends endorsement and implementation of a Strategic Framework for Wellness that includes Key Elements, Priorities for Action, Strategic Aims and Objectives.

The Key Elements to guide our actions to help New Brunswickers stay healthy longer include: health promotion and prevention; the determinants of health; linking wellness and illness; shared responsibility; collaboration and partnerships; empowering communities; government leadership and healthy public policy; best practices, evidence and research; measuring, monitoring, tracking progress and public reporting; citizen participation; and long term commitment.

The five Priorities for Action are healthy lifestyles, children and youth, seniors, communities, and workplace wellness.

Flowing from the five Priorities for Action are the twelve Strategic Aims:
- To increase physical activity levels (i.e., reduce physical inactivity)
- To increase adoption of healthy eating habits and maintenance of healthy weight
- To increase the percentage of non-smokers
- To reduce the incidence of addiction-related problems (including alcohol, drug and substance abuse, and gambling)
• To promote the adoption of healthy lifestyles during pregnancy
• To promote and support breastfeeding and postnatal support
• To promote and support early childhood development
• To promote healthy lifestyles for school-age children and healthy school environments
• To promote healthy lifestyles for youth
• To promote and support healthy aging
• To promote healthy communities
• To promote workplace wellness

Objectives for each Strategic Aim determine some of the ways the strategic aim can be achieved. The Committee expects that government departments would further flesh out the Objectives, by identifying specific actions, activities and measurable outcomes for each.

The Key Elements directly impacting effective implementation of the Strategic Framework for Wellness include: government leadership and healthy public policy; linking wellness and illness; collaboration and partnerships; supporting and sharing best practices, evidence and research; measuring, monitoring, tracking progress and public reporting; citizen participation; and long term commitment.

The Committee recommends the establishment of a high-profile focal point for wellness within government, such as a Wellness Secretariat. The Secretariat would have responsibility to: work with other departments and stakeholders, be a source of expertise on wellness, communicate research findings and information to stakeholders, release an annual wellness report, and facilitate and support a community approach to improve wellness. In addition, the Committee recommends the establishment of a high-level interdepartmental coordinating mechanism, such as a Deputy Minister level committee, to develop an action plan to implement Working Together for Wellness: A Wellness Strategy for New Brunswick. An officials' level interdepartmental committee would support the Deputy Ministers’ committee.

The Committee also recommends that government as a whole should ensure that all government departments develop healthy public policy, and review existing policies that impact on the wellness of New Brunswickers or the ability of New Brunswickers to improve their own health. All government departments should explore, identify and document their contribution to wellness into their corporate strategic planning processes and annual reports. Wellness should be incorporated into the government corporate performance measurement system.

New Brunswickers told us that self-care, primary health care, community health centres, and better utilization of health professionals would provide the best opportunity to incorporate wellness within the formal health care system. The formal health care system, Regional Health Authorities, organizations and community groups need to work together to identify and address health and wellness issues.
Although the focus of the report is on wellness, and not on illness and treatment, the two cannot and should not be totally separated. The Committee recognizes the significant contribution of the many organizations that work with individuals and families affected by illness to improve their health and quality of life. This support has a significant impact on the ability of New Brunswick to sustain an affordable health care system in the future.

Government should work to identify opportunities to collaborate with other levels of government, the business sector, universities, organizations, and communities to improve wellness. In addition, the Committee recommends that New Brunswick work with the Atlantic Health Promotion Research Centre to address wellness issues of common concern, such as chronic disease prevention, physical activity promotion, or adult health.

The Committee also recommends that the federal Romanow Commission address wellness as an important component of an affordable and sustainable health care system.
INTRODUCTION

Mandate and Scope

The Select Committee on Health Care was appointed by a resolution of the House adopted July 6, 1999, to examine, inquire into and report to the House with respect to the delivery of health care in New Brunswick and to consider such other matters referred to the Committee by the Minister of Health and Wellness.

At the request of the Minister of Health and Wellness, the Honourable Dennis Furlong, the Committee has reviewed and consulted with New Brunswickers on the issue of wellness. Your Committee has considered the valuable input received and is pleased to offer this Wellness Strategy report to the Legislative Assembly. The report provides a Strategic Framework for Wellness, including Key Elements of wellness, Priorities for Action, Strategic Aims and Objectives. Recommendations are offered on the mechanisms required to effectively implement the Strategic Framework for Wellness. The report addresses the challenge of how and where we need to place more emphasis on promoting wellness, preventing illness, and addressing the factors that influence wellness, to help New Brunswickers stay healthy longer.

The scope of this report is on wellness, health promotion and prevention, and the determinants of health. The report takes a broader view or “upstream” look at the factors that actually influence our health, to help keep us well and to prevent us from getting sick. It does not focus “downstream” on the health care or “illness treatment” system. The Committee’s role is to offer recommendations to the Legislative Assembly, but not to implement the recommendations, make program or funding commitments, or deliver programs.

Consultation Process

The Committee received presentations from the following government departments and agencies, and experts:

- The Honourable Dennis Furlong, Minister of Health and Wellness
- Dr. Mark Tremblay, Department of Kinesiology, University of New Brunswick
- Officials of the former Department of Municipalities (including the Sport, Recreation and Active Living Branch, now part of the Culture and Sport Secretariat)
- The Honourable Margaret Norrie McCain on her work with Dr. Fraser Mustard on the Ontario report The Early Years Study
- Officials of the Workplace Health, Safety and Compensation Commission
- Officials of the Department of Education (Anglophone and Francophone)
- Officials of the Department of Family and Community Services
- Officials of the Department of Health and Wellness
The First Report of the Select Committee on Health Care: Wellness Strategy Progress Report was tabled in the Legislative Assembly on June 16, 2000. The report included an update on the Committee’s workplan, a proposed definition of wellness, background on why wellness is important, the benefits we can achieve through investing in wellness, and an inventory of government health and wellness related programs, policies and initiatives.

Your Committee heard over ninety presentations during eight days of public hearings held in Fredericton, Edmundston, Moncton, Bathurst and Saint John, in October and November of 2000. The Committee also received over forty written briefs. The discussion guide What about WELLNESS? defined the parameters of the consultation by offering questions about the benefits of wellness, the health of New Brunswickers, and the responsibilities of individuals, families, communities, governments and the private sector to work together to help New Brunswickers stay healthy. The guide also asked questions about four key areas – children and youth, seniors, communities and workplaces, and asked participants about existing community and workplace initiatives and programs.

Appendix A provides a list of individuals and organizations that participated in the consultation process.

Following the consultation the Committee reviewed the presentations and submissions received to prepare this report. Excerpts of the valuable advice and information received from New Brunswickers are presented throughout the report.
WHAT IS WELLNESS?

The First Report of the Select Committee on Health Care: Wellness Strategy Progress Report proposed the following definition of wellness: Wellness is a state of emotional, mental, physical, social and spiritual well-being that enables people to reach and maintain their personal potential in their communities.

The five aspects of well-being are each important, but more importantly they need to be in balance to enable individuals to move towards improved wellness. The concept of community is important because the social context in which we live impacts on our well-being.

Three other concepts complement our definition, and are essential to understanding how to take action to improve wellness. These are:

- health promotion,
- prevention, and
- the determinants of health (or factors that influence our health).

Health promotion is about encouraging individuals and communities to make healthy lifestyle choices. The World Health Organization defines health promotion as “the process of enabling people to increase control over, and to improve their health.” The concept of having “control over” or being “empowered” to improve health is especially important.

Prevention is about preventing disease and injury. In terms of wellness, the Committee’s focus is on primary prevention, which Health Canada defines as “activities aimed at reducing factors leading to health problems, disease and injury.”

A growing body of evidence tells us that there are a number of interrelated factors that influence our health. These factors, called the determinants of health, include: income and social status; social support networks; education, employment/working conditions; social environments; physical environments; personal health practices and coping skills; healthy child development; biology and genetic endowment; health services; gender and culture. The determinants of health are the foundation of a healthy society.

Wellness is about more than the health care system. It is important to realize that the health services provided by the health care system are only one factor that influences our health. In fact, the other determinants of health have a larger influence on our health.

Consultation participants supported a shift in the way we think about health to put more emphasis on wellness, endorsed the Committee’s definition of wellness, and supported an approach that incorporates health promotion and prevention to address the determinants of health.
One group suggested that the definition of wellness should encompass the notion of control or self-determination over one’s health. Another group recommended that economic well-being should be included as a sixth aspect of well-being. One group wondered if all communities are on a level playing field. The Committee agrees that these concepts are important, and believes that control over one’s health is addressed in the definition of health promotion, and that economic well-being is included in the health determinant of income and social status. Community issues are addressed in a later section of this report.

Other presenters suggested that nutrition, housing and literacy should be determinants of health on their own. Under the current classification of health determinants accepted and approved by the Federal, Provincial and Territorial Ministers of Health, they fall under the determinants of “personal health practices and coping skills”, “physical environments” and “education”, respectively.

Recommendations

1. Your Committee recommends endorsement of the definition “Wellness is a state of emotional, mental, physical, social and spiritual well-being that enables people to reach and maintain their personal potential in their communities.”

2. Your Committee recommends endorsement of the complementary concepts of health promotion, primary prevention and the determinants of health.
WHO IS RESPONSIBLE FOR WELLNESS?

Individual Responsibility

“The message is, really, show how it actually affects other people. If I don’t look after my own health, for instance, this is what it is doing to my family. This is what it is doing to my community. This is what it’s doing to my tax rate. We have to connect those things to the larger picture. Also, if I am healthy, these are the resources I bring to other people. My actions influence the lifestyle of other people.” Dr. Renee Lyons, Atlantic Health Promotion Research Centre

Regarding personal responsibility for health, “One concern is that it does not recognize the impact of poverty, low-income and low level education on the ability to make responsible healthy choices. Secondly, it often leads to personal blame.” New Brunswick Association of Social Workers

New Brunswickers told us that individuals are ultimately responsible for their own health. However, not all of us have the same ability to make healthy lifestyle choices, because choice may be affected by factors such as income or education.

Some presenters told the Committee that people could offload their problems on the health care system because the service is free and there is no incentive to make healthy lifestyle choices. Suggestions such as introducing tax credits for those who practice healthy lifestyles, or adding surtaxes on junk food and fast food or on other unhealthy or risky behaviours, were offered to motivate people to take control of their health.

Family Responsibility

“. . . emphasis must be put on adults’ responsibilities toward their families, and they should be assisted through various programs such as Early Childhood Initiatives, how to handle divorce, effective parenting, For the Sake of the Children, etc.” Fernand Sirois, Institut de développement et recherche sociale [Translation.]

“And, if making good health choices for your child puts you in the category of ‘weird’, then it is clear that something has gone wrong.” Mary Ann Coleman, Sussex Society in the Public Interest

New Brunswickers told us that families are responsible for the health of family members, and that parents are the most important “wellness” role models children have.
Community Responsibility

“Communities are natural places for wellness to take root.” Community Health Centre, Saint John

“Communities carry a responsibility to all of their members.” Sussex Society in the Public Interest

Individuals are not only responsible for their own health, but also have a responsibility for the health of their communities. Likewise, communities need to take responsibility for individuals. Many expressed their belief that communities are the starting point to take action on wellness, and that health care facilities should be the last resort. This implies the need for a change in our thinking - from thinking of health as “illness care” to health as “wellness” and “empowering individuals and communities to take action to improve health.”

Government Responsibility

“Government’s role is essential and pivotal to laying the foundation for communities, schools, workplaces and families to strive for wellness.” Community Health Centre, Saint John

“Six critical responsibilities come immediately to mind.
• Focusing on wellness and reflecting all the determinants of health
• Investing wisely
• Making a commitment to devise healthy public policy
• Tracking progress
• Ensuring inclusion
• Staying abreast of health information technology, community development and other health promotion related issues.” Community Health Promotion Network Atlantic

Consultation participants told us that, in order to improve wellness, the New Brunswick government should provide leadership and be a “champion” and promoter of wellness. This may involve being a role model for wellness; being a source of information and expertise; providing services; partnering with communities, other levels of government and the business sector; sharing information and success stories; supporting research; providing incentives and funding; developing healthy public policy; and monitoring.

The First Report of the Select Committee on Health Care: Wellness Strategy Progress Report included an inventory of health and wellness related policies, programs and initiatives. This inventory illustrates that, to some extent, all government departments contribute to wellness, through the delivery of health and wellness related programs, or through the impact of their policies and programs on New Brunswickers. Wellness is not the sole responsibility of the Department of Health and Wellness.
Shared Responsibility

“A wellness strategy should be framed around shared responsibilities between individuals, families, communities and government.” New Brunswick Association of Community Living

“No one government, no one agency or no one group can make this change alone. It is only through the development of partnerships with government agencies, community organizations and the willingness of the people that we can make a difference to our present state of wellness.” Greater Moncton, Greater Saint John and Greater Fredericton YMCA’s

The First Report of the Select Committee on Health Care: Wellness Strategy Progress Report stated that “Wellness is everyone’s responsibility!” Consultation participants shared this view. All levels of government, businesses, universities, community groups, health care and social service providers, schools, families, and individuals are responsible for wellness, and need to work together to address wellness. Collaboration and partnerships are key to moving forward.

Shared responsibility does not mean that we can shirk responsibility off on someone else, but that we are each individually and collectively responsible for our own health and the health of others.
WHY WELLNESS?

How Healthy are New Brunswickers?

Traditional health status indicators focus on death and disease, such as life expectancy, mortality rates and hospital admission rates. There are relatively few statistics available on wellness itself or other positive aspects of health. With a wellness approach we can look at the causes of illness, such as risk factors, lifestyle behaviours and the determinants of health, such as eating habits, tobacco use, physical activity, education level, and income, to see how we fare.

Recent reports such as *Toward a Healthy Future: The Second Report of the Health of Canadians* (September 1999), and *Health Care in Canada: A First Annual Report* (April 2000) offer statistics about how healthy we are. The intent here is to provide only a quick glance at some of the available statistics.

- Life expectancy at birth has been increasing. Life expectancy at birth for Canadians was 78.6 years in 1996. Life expectancy for males was 75.7 years and 81.4 years for females. Life expectancy at birth for New Brunswickers for the same time period was 78.2 years, 75.2 years for males, and 81.2 years for females. New Brunswick has the highest life expectancy of the four Atlantic Provinces.

- Infant mortality rates have been decreasing steadily. In 1996, the Canadian infant mortality rate was 5.6 deaths per 1,000 births. The New Brunswick rate was 4.9 deaths per 1,000 births.

- Cardiovascular disease (including heart attack, cerebrovascular disease and stroke) is the major cause of death in New Brunswick. The second leading cause of death in New Brunswick is cancer. (*Vital Statistics Annual Report 1998, Department of Health and Community Services*)

- Men are more likely to die from heart disease, unintentional injuries, cancer and suicide. Women are more likely to suffer from depression, stress overload, chronic conditions (such as arthritis and allergies), and injuries and death resulting from family violence. Although overall cancer death rates have fallen for men, they have not declined for women, largely due to increases in lung cancer mortality rates.

- Unintentional injuries are the leading cause of death among children and youth. In particular, boys and young men are more likely to suffer unintentional injuries and sustain more severe injuries than girls and young women.

- Youth are the age group most likely to report the lowest levels of psychological well-being.

- Seniors are the age group most likely to have physical illness.
• Physical inactivity is an important risk factor for heart disease, diabetes and cancer. Rates of physical activity drop quickly as age increases, with males being more active and less sedentary than females in every age group. Statistics show that Western Canadians are significantly more active than Atlantic Canadians, and that Canadians with higher levels of education are more physically active than those with lower levels of education.

• Smoking is a significant risk factor for cardiovascular disease, lung cancer and other cancers. Smoking rates have dropped significantly from nearly half of Canadians smoking in 1970 to around 30% smoking now. Young women, women in general and low income Canadians have not experienced the same decreases in smoking rates. A particular concern is the increasing rate of smoking for young women.

• Body weight is largely determined by eating and physical activity practices. Body weights above the healthy weight range are linked to a variety of health problems, including cardiovascular disease, diabetes and some forms of cancer. *Health Care in Canada: A First Annual Report (2000)* rated New Brunswick as having the highest rate of obesity in the country.

• Aboriginal people remain at higher risk for illness, and premature death than the Canadian population as a whole. Chronic diseases such as diabetes and heart disease are more prevalent among aboriginal people than in the general population, and there is evidence that these conditions are increasing among Aboriginal groups.

Benefits of Wellness

“The benefits of wellness are boundless.” Recreation and Parks Association of New Brunswick

“...a ten percent increase in the proportion of Canadians who are physically active could save $173 million annually in health care costs for coronary heart disease, stroke, type 2 diabetes, colon cancer, breast cancer and osteoporosis – costs that will increase as the Canadian population ages.” Health Canada, Business Case for Active Living at Work

“Ensuring healthy lifestyles and living conditions cost money. What we spend on treating illness may now represent an ‘opportunity cost’ in what we do not spend in creating health.” Nurses Association of New Brunswick citing Cutshall 1992 & Labonté 1990

The *First Report of the Select Committee on Health Care: Wellness Strategy Progress Report* stated that “Investing in the health of New Brunswickers will help to ensure a sustainable health care system, and will result in long term societal benefits, including:

• better health,
• improved quality of life, and
• increased productivity.”
Consultation participants repeatedly expressed their belief that investment in wellness would decrease health care costs and contribute to the sustainability of the health care system in the long term. Many groups offered disease-specific estimates of the cost savings that could be realized with increased emphasis on wellness. Mounting evidence is available regarding the cost savings to employers in terms of improved attendance and reduced use of health benefits from implementing workplace wellness programs.

Vibrant communities, social benefits for individuals and communities, greater self-image, and feelings of belonging and achievement for individuals, are other benefits of wellness.

The Committee was also told that not all health promotion initiatives are effective, and that research and sharing information about existing initiatives will help governments and communities to choose initiatives that will be effective.

While wellness is not the lone “magic bullet”, it certainly is essential to the future affordability and sustainability of our health care system. We need to focus more effort “upstream” with a preventive approach that keeps us healthy in the first place, instead of just focusing “downstream” on the health care or illness system.
STRATEGIC FRAMEWORK FOR WELLNESS

Through defining wellness, reviewing the government inventory of health and wellness related programs, policies and initiatives included in the First Report of the Select Committee on Health Care: Wellness Strategy Progress Report, and listening to the individuals and groups that made presentations, the Committee discovered that wellness is a broad, comprehensive subject. Many government programs already contribute to wellness, but to date there has been no coordinated, broad, high-level direction to ensure that all government departments work to help New Brunswickers stay healthy longer. In addition, the Committee wanted to determine and focus on areas where we can make the biggest difference to help New Brunswickers to stay healthy longer.

The Strategic Framework for Wellness provides broad strategic direction for government to work to achieve the goal of helping New Brunswickers stay healthy longer. The framework includes Key Elements, Priorities for Action, Strategic Aims and Objectives.

The Key Elements of wellness are the basic building blocks central to our approach to help New Brunswickers to stay healthy longer. They flow from our definition of wellness, and the complementary concepts of health promotion, prevention and the determinants of health. They help to put wellness into action, and guide the Priorities for Action, Strategic Aims and Objectives that follow. They answer the questions “what elements are central to wellness and will guide what needs to be done?” or “how do we put wellness into action?”

The Priorities for Action determine “where” the Committee thinks action is most required. For each Priority for Action, there are defined Strategic Aims and Objectives. The Strategic Aims answer the question “what do we want to achieve or do?” The Objectives for each strategic aim determine some of the ways the strategic aim can be achieved. The Committee expects that government departments would further flesh out the Objectives, by determining specific actions, activities and measurable outcomes for each.

Figure 1 illustrates the Strategic Framework for Wellness.

Recommendation

3. Your Committee recommends endorsement and implementation of the Strategic Framework for Wellness, including the Key Elements and five Priorities for Action, with their corresponding Strategic Aims and Objectives, to achieve the goal of helping New Brunswickers to stay healthy longer.
Figure 1 – **Strategic Framework for Wellness**

*What is the overall goal?*
To help New Brunswickers stay healthy longer.

*How do we know if we are making progress to achieve the goal?*
By measuring, monitoring and tracking progress.

*Where is action most required?*
**Priorities for Action**

**Healthy lifestyles**

**Children and youth**

**Seniors**

**Communities**

**Workplace Wellness**

*What elements are central to wellness and will guide what we need to do?*

**Key Elements:**
- Health promotion and prevention
- The determinants of health
- Linking wellness and illness
- Individual and shared responsibility
- Collaboration and partnerships
- Empowering communities
- Government leadership and healthy public policy
- Best practices, evidence and research
- Measuring, monitoring, tracking progress and public reporting
- Citizen engagement
- Long term commitment

*What do we want to achieve or do?*
For each Priority for Action there are Strategic Aims and Objectives
Key Elements of Wellness

Health Promotion and Prevention

Health promotion is about encouraging and empowering individuals and communities to improve their health. Health promotion may focus on healthy lifestyles and personal coping skills, including nutrition, exercise, stress reduction, alcohol intake and tobacco use, as well as address the determinants of health. The concept of primary prevention is also encompassed within wellness.

Determinants of Health

Although healthy lifestyles are important, wellness isn’t just about individual lifestyle choices, personal coping skills, or even the health care system. The determinants of health allow us to take a population health approach to determine how to improve the health of New Brunswickers, and to take action on the determinants of health that are outside the control of individuals.

Linking Wellness and Illness

Although the primary focus of this report is about how to stay well and not about how to treat illness, a holistic or person-centred approach means that wellness and illness cannot be totally separated. New Brunswickers told us that self-care, primary health care, community health centres, and better utilization of health professionals, would provide the best opportunities to incorporate wellness within the formal health care system. There are also many opportunities to improve wellness outside of the formal health care service system, as demonstrated by the many health and wellness related initiatives offered by community groups and other non-governmental organization across the province.

Individual and Shared Responsibility

New Brunswickers told us that as individuals we have responsibility for our own health. We also have a responsibility for the health of others, including the health of family members and the health of communities. Shared responsibility means “wellness is everyone’s responsibility”.

Collaboration and Partnerships

Collaboration and partnerships are essential to move forward on wellness. This includes partnerships between levels of government, between government departments, between business and communities, between interested individuals and community groups within a community, and so on.
Empowering Communities

Community development approaches that empower communities to identify and address health and wellness in their own communities should go hand in hand with other health promotion strategies. Communities should be encouraged and supported to adopt an asset-building approach that builds on community strengths.

Government Leadership and Healthy Public Policy

Government’s role is to provide leadership and to be a “champion” for wellness. This includes ensuring that all government policies and programs, not just Department of Health and Wellness policies and programs, are developed with consideration of their impact on the wellness of New Brunswickers.

Best Practices, Evidence and Research

Information on success stories and best practices, evidence on effectiveness, and research on health promotion, prevention and the determinants of health are essential to all stakeholders involved in planning, monitoring and implementing wellness initiatives.

Measuring, Monitoring, Tracking Progress and Public Reporting

Measuring, monitoring and tracking progress are required if we are to know whether we are successful in improving wellness, and to determine if our Priorities for Action should change over time. This includes ongoing monitoring and reporting of health status, risk factors, the determinants of health, and government policies and programs. It is also essential to track the implementation of the Wellness Strategy itself.

Citizen Participation

The consultation process highlighted the important contribution so many New Brunswickers already make through health and wellness related community initiatives. We want to encourage all New Brunswickers to become involved in the pursuit of wellness.

Long Term Commitment

Investing in wellness will realize benefits such as better health, improved quality of life and increased productivity for New Brunswickers, but it is essential to realize that these benefits will be achieved in the long term. Dramatic change will not happen over-night or necessarily even in a few years, and therefore the commitment must be long term. The opportunity cost of not investing in wellness is being unable to maintain an affordable and sustainable health care system.
Priorities for Action, Strategic Aims and Objectives

In the *First Report of the Select Committee on Health Care: A Wellness Strategy Progress Report* and the public consultation discussion guide *What about WELLNESS?*, the Committee identified four areas for further exploration - children and youth, seniors, communities and workplaces. These areas were selected as significant based on the presentations made to the Committee by government officials and other experts in the fall and winter of 1999-2000.

A fifth priority area – healthy lifestyles – was added in response to what we heard from New Brunswickers about the importance of healthy lifestyles for all ages. Healthy lifestyles apply to all New Brunswickers, of all ages and abilities.

Several presenters thought that adult health and persons with disabilities should be included as additional priority areas. The Committee considers wellness to be an inclusive concept that applies to all New Brunswickers, regardless of age or ability.

The five Priorities for Action tell us “where” we are going to take action on wellness.
Priority for Action - Healthy Lifestyles

“You may have noticed that I identified several modifiable risk factors for heart disease and stroke several times during my presentation. I could be talking about any disease state – the risk factors that we can change tend to be the same.” Heart and Stroke Foundation of New Brunswick

“Cancer is a preventable disease, the leading cause of premature death, and two-thirds of cancer deaths are caused by lifestyle choices.” Canadian Cancer Society

“90% of all diabetes in Canada is Type 2 diabetes, which is preventable... The keys to prevention are healthy eating and a physically active life.” Health Canada, Canadian Diabetes Strategy - A National Challenge brochure

“The potential health benefits of these efforts go far beyond managing and preventing diabetes: improved nutrition and activity levels can help lower the risk of an array of other chronic diseases – heart disease, colon cancer and osteoporosis, for example – and improve health in the Canadian population as a whole.” Health Canada, Canadian Diabetes Strategy - A National Challenge brochure

“The health risks of inactivity include premature death, heart disease, obesity, high blood pressure, adult-onset diabetes, osteoporosis, stroke, depression and colon cancer. The benefits of regular activity include better health, improved fitness, better posture and balance, better self-esteem, weight control, stronger muscles and bones, feeling more positive and energetic, relaxation and reduced stress, and continued independent living later in life.” Canada’s Physical Activity Guide to Healthy Living, Health Canada

“...what we eat on a day to day basis is the primary determinant of wellness or sickness.” Dr. David Forgie

“Young people today are increasing their degree of risk taking. Tobacco, drug and alcohol use has increased over the last decade.” Youth Council of New Brunswick

Over and over again, presenters told the Committee that leading a healthy lifestyle prevents illness – cardiovascular disease, cancer, diabetes, osteoporosis, etc. A healthy lifestyle includes being physically active, eating a healthy diet, maintaining a healthy weight, limiting consumption of alcohol, and not smoking or abusing drugs.

Dr. Mark Tremblay told the Committee about the negative health effect our increasingly sedentary lifestyle is having on all New Brunswickers, and especially on our children and youth. Reflecting the importance of physical activity to wellness, the single recommendation offered most often in the consultation was that government should invest in quality physical education for school children in all grades.
Many presenters told us about the significance of nutrition, and the ill effects of poor eating habits on our health. The Committee was told that poor eating habits may be due to lack of knowledge about nutrition and healthy eating, the convenience and ready availability of junk food and fast food, lack of shopping and cooking skills, lack of family resource management skills, as well as other factors such as low income or lack of transportation. It is not only important for individuals to eat properly and for parents to ensure their children eat properly, but also that schools and workplaces promote and offer healthy food choices.

The combined effect of physical inactivity and poor eating habits has contributed to New Brunswick recently being rated as having the highest rate of obesity in the country.

We have made progress increasing the number of non-smokers over the last thirty years. However, approximately 28 percent of New Brunswickers over the age of 15 still smoke, and there is concern regarding the youth smoking rate (especially females).

Alcohol and drug abuse not only affects the health of individuals, but also the health of families. Presently treatment is the primary focus of Addictions service delivery, although there are numerous community prevention initiatives. Of particular concern, the Committee was told that youth tobacco, alcohol and drug use has increased over the past decade.

For the Priority for Action - Healthy Lifestyles, the Strategic Framework for Wellness addresses four areas - physical activity, nutrition, tobacco/smoking, and addictions. For each of these four areas, a Strategic Aim and Objectives are presented below.

**Healthy Lifestyles - Physical Activity**

**Strategic Aim** – to increase physical activity levels (i.e. reduce physical inactivity levels)

**Objectives:**
- To promote physical activity for all New Brunswickers
- To identify and implement models to encourage all New Brunswick children and youth to be more physically active (e.g., increase/improve physical education in schools, increase participation and reduce access barriers to participation in school and community recreation and sport programs, ensure appropriate access to school facilities for recreation and sport use after hours, etc.)
- To work in partnership with stakeholders to increase participation of New Brunswickers in physical activity
- To support the 1997 agreement by Federal, Provincial, and Territorial Ministers of Physical Activity, Recreation and Sport to “reduce physical inactivity” by 10 percent between 1998 and 2003
- To promote the use of Health Canada’s Canada’s *Physical Activity Guide to Healthy, Active Living* (1998) and *Canada’s Physical Activity Guide for Older Adults* (1999)
- To promote the use of Health Canada and the Canadian Council for Health and Active Living at Work’s *The Business Case for Active Living at Work*
• To review and promote the use of Health Canada’s *Canada’s Physical Activity Guide to Healthy Active Living for Children and Youth* when it is released in Fall 2001

Key Departments: Culture and Sport Secretariat, Education, Health and Wellness

**Healthy Lifestyles - Nutrition**

**Strategic Aim** – to increase adoption of healthy eating habits and maintenance of healthy weight

**Objectives:**

• To promote healthy eating habits for all New Brunswickers
• To identify and share information about best practices, programs and existing community initiatives, that promote and support healthy eating for at risk groups such as teenage mothers, low income families, and frail seniors (e.g., group food purchase programs, First Steps, Meals on Wheels, Wheels to Meals, etc.)
• To promote the use of Health Canada’s “Canada’s Food Guide”

Key Departments: Health and Wellness, Education, Family and Community Services

**Healthy Lifestyles – Tobacco/Smoking**

**Strategic Aim** – to increase the percentage of non-smokers

**Objectives:**

• To increase the number of children and youth who stay smoke-free
• To increase the number of smokers who quit and remain smoke-free
• To identify and share information about best practices, programs and existing community initiatives that encourage children and youth to be non-smokers (e.g., Ridgewood Addictions Peer Led Tobacco Cessation Program)
• To explore models of best practice in smoking cessation
• To increase the number of environments that are smoke-free (e.g., schools, workplaces, public places, etc.)
• To work in partnership with stakeholders to update New Brunswick’s *Comprehensive Tobacco Strategy*

Key Departments: Health and Wellness, Education, Environment and Local Government, Training and Employment Development
Healthy Lifestyles - Addictions

Strategic Aim – to reduce the incidence of addiction-related problems (including alcohol, drug and substance abuse, and gambling)

Objectives:
- To put more emphasis on prevention of addictions
- To promote, encourage and support community development approaches to prevent addictions
- To identify and share information about best practices, programs and existing community addictions initiatives
- To develop and support effective social marketing initiatives about addictions
- To integrate or link Public Health and Addiction Services prevention efforts, where appropriate

Key Departments: Health and Wellness
Priority for Action - Children and Youth

“To build a strong society, children must get off to a good start.” Fernand Sirois, Social Research and Development Institute

“We must break the cycle of depending on a cure for our illnesses to providing education and opportunities on what we can do to prevent these illnesses. By providing a better curriculum in the public education system on the benefits of wellness and healthy lifestyle we can begin to make inroads on lessening the burdens on our health care system.” Greater Moncton, Greater Saint John and Greater Fredericton YMCA’s

“Adolescents are the most difficult population for caregivers to reach and the group least likely to seek help.” Community Health Centre, Saint John

“Education and support services for pregnant teenagers and teen mothers are much needed. Adolescent mothers often lack the financial resources, emotional support and parenting skills necessary to raise healthy children on their own.” New Brunswick Association of Social Workers

“Yet, the simple act of increasing breastfeeding initiation and duration rates in the province could result, in the long term, in an overall decrease in both of these diseases (cardiovascular disease and cancer) and also in enormous health care savings.” Gail Storr, University of New Brunswick (Fredericton) Breastfeeding Clinic

The period from conception to age six is critical to healthy childhood development. New Brunswickers told the Committee that children are the number one priority area for action on wellness. Investment in our children will ensure that our children enjoy “life-long wellness”.

In September 2000, the Federal, Provincial and Territorial First Ministers (with the exception of Quebec) agreed “on the importance of supporting families and communities in their efforts to ensure the best possible future for their children.” Phase 1 of the New Brunswick Early Childhood Development Agenda announced by the Department of Family and Community Services in April 2001, will help pregnant women, children under six, and their families.

Children’s Issues: New Brunswickers identified the following issues as important to the wellness of our children:
• Physical education and physical activity
• Other healthy lifestyles issues – tobacco, addictions
• Families and parenting
• Prenatal education
• Early childhood development and school readiness
• Income (i.e., poverty)
• Mental health
• School health education
• Life skills curriculum
• School environment including air quality
• School food and nutrition policy
• Breastfeeding
• Early assessment and treatment for children with autism and learning disabilities
• Literacy

Youth Issues: Youth wellness related issues identified in the consultation included:
• Physical education and physical activity
• Other healthy lifestyle issues – nutrition
• Risk taking behaviours – tobacco, alcohol and drug abuse
• Need for health information targeted for youth
• School health education curricula (including human growth and development, sexual health and family life)
• Life skills curriculum
• Mental health and emotional wellness
• Weight and body image
• Suicide prevention
• Need for youth involvement
• Families and parenting
• Injury prevention (e.g., traumatic brain injury)
• Workplace safety education

In particular, it was noted that life skills education contributes to all five aspects of well-being included in the definition of wellness. All middle school and high school students should have access to a quality life skills curriculum provided by appropriately trained staff to help them to develop the personal coping skills they will need to be resilient and productive adults. The Committee was told that life skills education is not currently provided in a consistent manner across the province.

For the Priority For Action - Children and Youth, the Strategic Framework for Wellness addresses five age groups – prenatal period, postnatal period, early childhood, school-age, and youth. For each of these five areas, a Strategic Aim and Objectives are presented below.

**Children and Youth - Prenatal Period**

**Strategic Aim** - to promote the adoption of healthy lifestyles during pregnancy

**Objectives:**
• To promote healthy lifestyles during pregnancy
• To promote the benefits of breastfeeding
• To work to identify and remove barriers to the adoption of healthy lifestyles during pregnancy, and the decision to breastfeed, especially for at risk groups, including teenagers and low income mothers
• To encourage prenatal programs to address breastfeeding, parenting skills, life skills, and healthy lifestyles for all New Brunswickers
• To encourage and promote awareness of community prenatal programs and community groups that provide breastfeeding advice and support
• To raise awareness of community programs that address both prenatal and postnatal care for at risk groups, including pregnant teenagers and low income mothers (e.g., First Steps)

Key Departments: Health and Wellness, Family and Community Services, Education

**Children and Youth - Postnatal Period**

**Strategic Aim** – to promote and support breastfeeding and postnatal support

**Objectives:**
• To support new mothers and families in the postnatal period
• To promote and support breastfeeding
• To identify best practices that support mothers who choose to breastfeed in the early days and weeks, both in the hospital and at home (e.g., support in hospitals, public health nurse visits, community support groups, etc.)
• To promote awareness of community support groups and other programs that provide postnatal support
• To examine the benefits, risks and outcomes of early discharge policies and evaluate the role of community follow-up programs

Key Departments: Health and Wellness, Family and Community Services

**Children and Youth - Early Childhood**

**Strategic Aim** – to promote and support early childhood development

**Objectives:**
• To promote and support healthy lifestyles (including healthy eating habits and physical activity)
• To promote literacy
• To promote the development of social skills
• To promote parenting skills education
• To support families and communities
• To increase access to quality, affordable childcare
• To ensure appropriate screening of all pre-school children to identify developmental and health problems
• To build on the existing Early Childhood Initiatives Program
Key Departments: Family and Community Services, Health and Wellness, Education, Literacy New Brunswick

**Children and Youth - School-Age** (Kindergarten, Elementary and Middle School)

**Strategic Aim** – to promote healthy lifestyles for school-age children and healthy school environments

**Objectives:**
- To promote healthy lifestyles
- To provide appropriate health education (including healthy lifestyles, mental health, etc.) and life skills education
- To identify opportunities and explore models to integrate healthy lifestyle concepts into the whole school curriculum
- To review and improve the life skills curriculum to ensure that all students have access to effective life skills education
- To promote the development of good social skills, encourage respect for others, and reduce bullying
- To promote literacy
- To promote and support healthy school environments, including good air quality
- To encourage sharing of best practices among school districts that have developed air quality policies or other “healthy” policies
- To review and implement the existing school food and nutrition policy that supports healthy eating habits
- To provide appropriate access to school facilities for community and recreational use after hours
- To encourage and support parents and families

Key Departments: Education, Health and Wellness, Literacy New Brunswick

**Children and Youth - Youth** (High School and up)

**Strategic Aim** – to promote healthy lifestyles for youth

**Objectives:**
- To promote healthy lifestyles
- To prevent unwanted pregnancies
- To provide information on healthy lifestyles and health issues for youth
- To promote and support suicide prevention
- To review current health and related curricula to ensure all students have access to information and programs that address family life, healthy eating and cooking, mental health, body image, relationships, etc.
• To review and improve the life skills curriculum to ensure that all students have access to effective life skills education
• To encourage the parents of youth to be active in school activities
• To promote and support youth led or “peer led” initiatives to address health and wellness issues
• To promote emotional wellness and address stress
• To promote workplace safety education
• To prevent injury

Key Departments: Education, Health and Wellness, Youth Council of New Brunswick, Workplace Health, Safety and Compensation Commission, Training and Employment Development
Priority for Action - Seniors

“We believe the whole question of enabling individuals to develop and maintain a state of wellness is of vital importance to all sectors of the Province’s population, but particularly to the growing proportion of older adults.” Third Age Centre, St. Thomas University

“There should be programs to promote physical activity and social activity. Inactivity and social isolation are key determinants of health in the elderly. Inadequate disease education and medication mis-use are also major obstacles to the promotion of wellness amongst our elderly.” New Brunswick College of Family Physicians

“All of us need to provide programs and opportunities for the elderly to remain active and valued in our communities. Seniors represent an enormous untapped resource in this province. Let us recognize their knowledge and skills and provide opportunities for communities to benefit from their life experience.” Heart and Stroke Foundation of New Brunswick

Shifting Sands: The Changing Shape of Atlantic Canada, Economic and Demographic Trends and their Impacts on Seniors (1999) calls for increased health promotion and prevention programming for seniors because these programs contribute to healthy aging and independence.

New Brunswickers agree that healthy lifestyles, health promotion, health information, and disease education and prevention are important to keep seniors healthy and active. Social support was also identified as very significant. Lack of transportation can contribute to isolation and unhealthy lifestyle habits for seniors. Several presenters also identified poverty and income (especially low income for senior women) as an issue influencing the health of seniors. Medication mis-use, literacy, research and the need for a liaison mechanism between government and seniors, were also identified as issues for seniors.

Looking “downstream”, New Brunswickers told us that access to health care services and delivery of long term care and related services (including nursing homes, home care, home support and home nursing services, informal caregiver burden, respite care, and end-of-life care) will become increasingly important as the population ages and demand for services increases. Although promotion and prevention are the focus of this report, rather than health services delivery, the Committee acknowledges that New Brunswickers have identified these service delivery issues as important, and therefore, that long term care and related services may require review and consultation on their own.

Many community programs and initiatives directed at seniors were identified. Many New Brunswick seniors are active participants in their communities and in voluntary groups and organizations.
For the Priority for Action - Seniors, the Strategic Framework for Wellness includes the following Strategic Aim and Objectives.

**Seniors**

**Strategic Aim** – to promote and support healthy aging

**Objectives:**
- To promote physical activity, active living and healthy lifestyles for seniors
- To promote and support healthy lifestyles (including healthy eating habits) for seniors, and especially for frail or isolated seniors (e.g., Meals on Wheels, Wheels to Meals, food purchasing and delivery groups, etc.)
- To encourage community groups to build social support networks for frail or isolated seniors (mail carrier check-in programs, etc.)
- To explore opportunities to provide information to seniors and their families on existing community programs and services for seniors in appropriate formats (e.g., phone-in services, newspaper, Internet, etc.)
- To recognize and celebrate seniors’ contributions to their communities through volunteerism
- To promote and support seniors’ activities and events across the province (e.g., Seniors Games)
- To continue to work to address the factors that impact on health (e.g., income support, housing options, elder abuse, etc.)
- To identify best practices, programs and models to address medication misuse

Key Departments: Culture and Sport Secretariat, Family and Community Services, Health and Wellness
Priority for Action - Communities

“A healthy community is a community in which all organizations are working effectively together to improve the quality of all peoples’ lives. A healthy community is a significant resource and support for individuals.” Community Health Centre, Saint John

“At the larger system level, primary health care reform must reflect a paradigm shift by moving from expert-centered, illness focused, reactive health care towards one that is more client-centred, health focused and proactive. This shift must occur at the local level through programs for community capacity development, empowering the community to pursue their health goals.” Nurses Association of New Brunswick

“Combinations of health promotion strategies with community buy-in have the greatest possibility for success.” Dr. Renee Lyons, Atlantic Health Promotion Research Centre

In the late 1970’s and early 1980’s lifestyle programs targeted at individuals were seen as the best way to improve health and wellness. Today experts say that empowerment and participation are essential to improving community health. New Brunswickers agree, and told us that they see communities as the starting point for wellness and institutions as “the last resort”. Citizens know their community’s needs and strengths best, and change is likely to be more lasting and meaningful when it is initiated from the ‘bottom-up’.

We know that we are not starting from scratch to empower New Brunswick communities. We heard about community initiatives including the Mouvement Acadien des Communautés en Santé Du Nouveau-Brunswick, the Bathurst Healthy Community Network, the Urban Core Support Network in Saint John, and the Community Health Centre in Saint John, to name but a few. There are also hundreds of other provincial organizations, community groups, advocacy groups, church groups, volunteer groups, service groups, professional groups and other groups in the province that support the health of their communities.

The healthy communities movement is a model that has been implemented worldwide. It is a social, economic and community leadership tool that promotes health by getting local decision-making authorities, residents, and players in the community to work together to improve the quality of life. With commitment and appropriate funding, this movement could grow in New Brunswick.

The Committee was told that community groups could benefit from networking and sharing information with other organizations in their own communities, as well as with organizations around the province.

In addition, in recognition of the International Year of Volunteers, the Committee commends the contribution of volunteers across the province, who work to improve the health of their communities.
For the Priority for Action - Communities, the Strategic Framework for Wellness includes the following Strategic Aim and Objectives.

**Communities**

**Strategic Aim** – to promote healthy communities

**Objectives:**
- To promote a community development approach to wellness issues that identifies and builds on community strengths (e.g., healthy communities movement)
- To provide training and expertise to assist community groups to design and implement asset-based community development approaches to address wellness issues
- To encourage the development of community information sharing networks
- To compile and share information on New Brunswick community wellness related programs (e.g., an Internet clearinghouse or “sharinghouse” of community wellness initiatives, an annual report/inventory of community wellness related initiatives, etc.)
- To encourage and recognize community volunteerism
- To recognize community initiatives that make a difference to wellness
- To ensure appropriate policies that will allow community groups to access school and other public or government owned buildings after hours
- To ensure that the Regional Health Authorities link or partner with community groups to determine community wellness needs and goals
- To explore and develop incentives for communities to encourage them to address wellness issues

Key Departments: Health and Wellness, Environment and Local Government, Culture and Sport Secretariat
Priorities for Action - Workplace Wellness

“Wellness in the workplace is all about people in the workplace.” Debra Dickeson, Susan Nind and Karen Watson

“There is mounting evidence supporting the fact that a healthy workplace is just good business.” Heart and Stroke Foundation of New Brunswick

“A proper wellness program is more than on-site aerobic classes and lunch-and-learn sessions on low fat cooking, it is the development of a working environment that encourages and promotes positive lifestyle behavioural change.” International Brotherhood of Electrical Workers, Local 37

The top workplace health issues identified by consultation participants were mental health (including stress, anxiety and depression); followed by injuries, low morale and job satisfaction; risk factors and behaviours that lead to illness (sedentary lifestyle, smoking, etc.); and workplace safety (including eye safety).

The Committee also heard about the importance of job creation, wage issues, the Workplace Health, Safety and Compensation Commission, and childcare. To a lesser extent, seasonal employment, unions, and employment standards were identified. Some participants identified labour relations, the need for supportive and flexible workplace and labour policies, employment issues related to persons with AIDS/HIV, employment issues for persons with disabilities, and the number of statutory holidays, as issues related to workplace health.

There is considerable evidence of the benefits of workplace wellness. Benefits include:
- cost savings to the employer
- increased productivity
- decreased absenteeism
- decreased on the job accidents, workers compensation claims and disability days
- increased job satisfaction, morale and loyalty
- decreased stress levels
- increased retention and decreased staff turnover

However despite substantial evidence of these benefits, consultation participants indicated that New Brunswick employers have been slow to embrace workplace wellness.

In March 2001, Health Canada and the Canadian Council for Health and Active Living at Work released a new Web site called The Business Case for Active Living at Work. The Web site promotes the benefits of an active workplace and offers information to help Canadian workplaces start their own workplace wellness programs.

For the Priority for Action – Workplace Wellness, the Strategic Framework for Wellness includes the following Strategic Aim and Objectives.
**Workplace Wellness**

**Strategic Aim** – to promote workplace wellness

**Objectives:**
- To promote workplace wellness programs
- To ensure that the Government of New Brunswick is a role model re workplace wellness
- To promote the benefits of workplace wellness programs to Employers (e.g., via a campaign)
- To identify and develop options to address the challenges of small business to offer workplace wellness programs (e.g., networking, partnerships, etc.)
- To recognize workplaces that are role models for wellness
- To explore and develop incentives for Employees who participate in workplace wellness programs
- To explore and develop incentives for Employers who offer workplace wellness programs
- To determine the appropriate “provincial government home” for the promotion of workplace wellness (e.g., Health and Wellness, Workplace Health Safety and Compensation Commission, Training and Employment Development, etc.)
- To support and promote Health Canada and the Canadian Council for Health and Active Living at Work’s *The Business Case for Active Living at Work*

Key Departments: Training and Employment Development, Workplace Health, Safety and Compensation Commission, Health and Wellness, Culture and Sport Secretariat
FROM STRATEGY TO ACTION

A Strategic Framework for Wellness, with Key Elements, Priorities for Action, Strategic Aims and Objectives is not enough, without the commitment and mechanisms to implement it. Wellness is everyone’s responsibility, but government’s role to work together with others for wellness needs to be defined.

Effective implementation of Working Together for Wellness: A Wellness Strategy for New Brunswick should be guided by the Key Elements of wellness, especially the following:

- Government leadership and healthy public policy
- Linking wellness and illness
- Collaboration and partnerships
- Supporting and sharing best practices, evidence and research
- Measuring, monitoring, tracking progress and public reporting
- Citizen participation
- Long term commitment


A high-profile focal point for wellness within government is needed. This could involve the establishment of a high-profile Wellness Secretariat, the establishment of a Wellness Unit within the Department of Health and Wellness, and/or increasing the organizational capacity for health promotion and wellness within the Department of Health and Wellness.”

Such an organization could function to:

- Be a ‘wellness champion’ and promoter
- Be the communication centre for health promotion and wellness
- Be a source of expertise and information on health promotion and wellness related issues
- Be a source of expertise on social marketing
- Disseminate information on wellness
- Celebrate, compile and share success stories, best practices and lessons learned
- Facilitate/support a community approach to improve wellness
- Support research
- Work with other departments and stakeholders
- Release an annual public report (or wellness report card) on the state of wellness in New Brunswick

In addition to the establishment of a focal point for wellness, mechanisms also need to be put in place to ensure that all departments work individually and together to identify opportunities to address wellness, and to implement and be accountable for their
contribution to wellness and the implementation of Working Together for Wellness: A Wellness Strategy for New Brunswick. These could include:

- Establishing a Deputy Minister level coordinating committee to be responsible for developing, implementing, monitoring implementation of and being accountable for an implementation plan to respond to all the recommendations, priorities for action, strategic aims, and objectives of A Wellness Strategy for New Brunswick
- Establishing an Interdepartmental Committee to be responsible to and support the Deputy Minister level coordinating committee
- Implementing a model similar to British Columbia’s Provincial Health Officer, who publicly reports on wellness status and progress to achieve the provincial health goals
- Requiring all government departments to include a section on wellness in their annual reports
- Requiring the government corporate performance measurement system to incorporate measurement of wellness
- Ensuring accountability of government departments for wellness via reporting to a legislative committee (e.g. Standing Committee on Public Accounts or the Select Committee on Health Care)

The Committee found the British Columbia Provincial Health Officer model particularly interesting. The Provincial Health Officer serves as a high profile advocate for health promotion and population health, and produces annual public reports that address the health status of British Colombians, the progress to reach British Columbia’s health goals, and also review health related issues and programs across government.

Ensuring that all government policies are developed with consideration of their impact on the health and wellness of New Brunswickers and that existing policies contribute positively to the wellness of New Brunswickers, will demonstrate healthy public policy. New Brunswickers told the Committee that all departments need to work individually and together to plan to improve wellness and monitor their contribution to wellness.

Although the focus of the report is on wellness, and not on illness and treatment, the two cannot and should not be totally separated. New Brunswickers told us that self-care, primary health care, community health centres, and better utilization of health professionals would provide the best opportunity to incorporate wellness within the formal health care system. Regional Health Authorities, organizations and community groups need to work together to identify and address health and wellness issues.

The Committee also recognizes the significant contribution of the many organizations that work with individuals and families affected by illness to improve their health and quality of life. This support has a significant impact on the ability of New Brunswick to sustain an affordable health care system in the future.
Government has the opportunity to collaborate with many other organizations and groups to improve the wellness of New Brunswickers, including but not limited to community groups, other levels of government, other provinces, universities, and the business sector. Opportunities should be actively pursued and identified.

Communicating and sharing of success stories, best practices, evidence, and research will help to ensure that all stakeholders benefit from the lessons learned by others.

Measuring, monitoring and tracking progress are critical to the successful implementation of Working Together for Wellness: A Wellness Strategy for New Brunswick. Government needs to measure wellness status, and implement and monitor the implementation of Working Together for Wellness: A Wellness Strategy for New Brunswick. An annual ‘wellness report’ could publicly present information on wellness status and the progress made towards reaching the Strategic Aims identified in this report.

To implement this report, government needs to develop an action or implementation plan, that identifies lead and secondary responsibility centres (departments) to address and respond to all the Recommendations, Strategic Aims and Objectives. In developing this plan, opportunities for partnership and collaboration with other sectors should be pursued.

Presenters told the Committee that government should continue to work to improve existing measures and indicators of wellness at the provincial, regional and community level, so that stakeholders can better identify and monitor wellness needs, and take action to address them.

New Brunswickers told the Committee that policy development for wellness should be an inclusive process that includes an effective means of engaging citizens and people working on the front lines.

Investing in wellness will realize benefits, but it is essential to realize that the benefits will be long term. With this in mind, the federal Romanow Commission should address wellness as an important component of an affordable and sustainable health care system.

The recommendations below are offered to meet the Key Elements of effective implementation.
Recommendations

4. Your Committee recommends the establishment of a high-profile focal point for wellness within government, such as a Wellness Secretariat, to:

   a) Work with other departments and stakeholders to coordinate government activities regarding wellness

   b) Be a source of expertise on health promotion and wellness to government departments, community groups, organizations and individuals

   c) Communicate research findings and information to government departments, community groups, organizations and individuals

   d) Release an annual public report (or wellness report card) on the state of wellness in New Brunswick

   e) Facilitate and support a community approach to improve wellness

5. Your Committee recommends the establishment of a high-level interdepartmental coordinating mechanism, such as a Deputy Minister level committee, to develop an action plan, coordinate and follow-up on the implementation of Working Together for Wellness: A Wellness Strategy for New Brunswick. Your Committee further recommends the establishment of a supporting officials level interdepartmental committee.

6. Your Committee recommends that government as a whole, and each government department:

   a) Ensure that all government policies are developed with consideration of the impact on the health and wellness of New Brunswickers

   b) Review existing government policies to identify areas that are presently impacting on the health and wellness of New Brunswickers, or impacting on the ability of New Brunswickers to improve their own health

   c) Ensure that all government departments explore, identify and document their contribution to wellness in their corporate strategic planning processes and annual reports

   d) Incorporate wellness into the government corporate performance measurement system

7. Your Committee recommends that the Regional Health Authorities’ mandate should include a responsibility to address and be accountable for their contribution to wellness. Self-care, primary health care and community health centres that better
utilize all health professionals, should be considered as ways to incorporate wellness within the formal health care system.

8. Your Committee recognizes the significant contribution of the many organizations and community groups that work with New Brunswickers to improve their health and quality of life, and recommends that the Regional Health Authorities work together with organizations and community groups to address community health and wellness needs.

9. Your Committee recommends that government work to identify opportunities to:

   a) Work together with other levels of government, the business sector, universities, communities, non-government organizations and community groups to improve wellness

   b) Work together with the other Atlantic Provinces to address wellness issues of common concern. Possible examples for collaboration include chronic disease prevention, physical activity promotion or adult health

   c) Work with the Atlantic Health Promotion Research Centre at Dalhousie University to ensure stakeholders have the best available evidence to address wellness

10. Your Committee recommends that policy development for wellness be an inclusive process that includes an effective means of engaging citizens and people working on the front lines.

11. Your Committee recommends that the federal Romanow Commission address wellness as an important component of an affordable and sustainable health care system.
CONCLUSION

Your Committee gave serious consideration to the valuable advice and information provided by New Brunswickers in the public consultation process. Your Committee believes that endorsement and implementation of the Strategic Framework for Wellness, Key Elements, Priorities for Action, Strategic Aims, and Objectives will help government to meet the challenge of putting more emphasis on promoting wellness, preventing illness, and addressing the factors that influence wellness, to help New Brunswickers stay healthy longer.

Your Committee believes that effective implementation of Working Together for Wellness: A Wellness Strategy for New Brunswick will include the establishment of a high-profile focal point for wellness within government and an interdepartmental coordinating mechanism to implement the report, a commitment to healthy public policy, and the identification of opportunities for partnerships and collaboration to work together for wellness.
APPENDIX A

Public Consultation Submissions/Participants

Public Hearings Participants

Addiction Services
Advocacy Committee College of Psychologists of New Brunswick
AIDS New Brunswick
Alzheimer Society of New Brunswick
Anderson, Richard
Atlantic Health Promotion Research Centre
Atlantic Health Sciences Corporation
Atlantic Health Sciences Corporation & NB Heart Centre
Brain Injury Association of New Brunswick Inc.
Campbellton / Dalhousie and District Labour Council
Canadian Cancer Society - New Brunswick Division
Canadian Diabetes Association
Canadian Mental Health Association
Canadian National Institute for the Blind (New Brunswick Division)
Canadian Red Cross
Coates, Dr. John, Ph.D.
    Associate professor, Saint Thomas University
Coburn, Stephanie
Coleman, Mary Ann
College of Psychologists of New Brunswick
Common Front for Social Justice
Common Front for Social Justice, Chaleur Region
Community Health Centre
Community Health Promotion Network Atlantic
Connaught St. School Family and School Association
Consumer Health Library Committee
Consumer Empowerment Centre
Crosby, Russell, M.Sc.
Dickeson, Debra
Domestic Violence Community Action Group
Donahue, Charles
Donovan, Patty
Eastern Cooperative Health Organization
Forgie, Dr. David
Fredericton Autism Centre for Education
Gaudet, Ted
Heart and Stroke Foundation of New Brunswick
International Brotherhood of Electrical Workers, Local 37
Learning Disabilities Association of New Brunswick
Léger, Louis
Lévesque, Dr. Georges Henri
McGuire, Theresa, RN
Maritime Centre of Excellence for Women’s Health
Michalica, Karel, M.Sc.
Michaud-Légal, Gaétanne, M.S.W.
Monoparentilité
Mouvement Acadien des Communautés en Santé Du Nouveau-Brunswick
New Brunswick Association for Community Living
New Brunswick Association of Family Resource Centers
New Brunswick Association of Occupational Therapists
New Brunswick Association of Optometrists
New Brunswick Association of Social Workers
New Brunswick Chiropractors Association
New Brunswick Coalition for Literacy
New Brunswick College of Family Physicians
New Brunswick Council of Nursing Homes Union - CUPE
New Brunswick Federation of Home and School Associations, Inc.
New Brunswick Federation of Labour
New Brunswick Healthcare Association
New Brunswick Home Economics Association - Fredericton Chapter
New Brunswick Lung Association
New Brunswick Massotherapy Association
Nicholl, Kate
Nind, Susan
Nor’East Health Network, Region 6
Nurses Association of New Brunswick
Nursing School, Shippagan Campus in Bathurst
Nursing School of Université de Moncton - Edmundston Campus
Nutrition and Lifestyle Consulting
Parents for Parents Action Committee
Recreation and Parks Association of New Brunswick, Inc.
Region 1 Hospital Corporation (Beauséjour)
Region 4 Hospital Corporation
Rickards, Sue
Ridgewood Addiction Services
School of Kinesiology and Recreology, Université de Moncton
Social Research and Development Institute Inc.
Société des Acadiens et des Acadiennes du Nouveau-Brunswick
Société des Acadiens et des Acadiennes du Nouveau-Brunswick et le Front Commun pour la justice
Sturgeon, Dorothy
Sussex Community for Wellness
Sussex Society for Public Interest
The Arthritis Society, NB Division
Third Age Centre
Tremblay, Dr. Mark, Ph.D.
Union des Femmes pour l’Équité Salariale
Université de troisième âge du Nord-Ouest Inc.
University of New Brunswick Breastfeeding Clinic
University of New Brunswick - Faculty of Nursing
Urban Core Support Network
Victorian Order of Nurses - New Brunswick
Watson, Karen
Wisted, Robert
YMCA (Fredericton and Saint John Division)
Youth Council of New Brunswick
Written Submissions

Advisory Council on the Status of Women
Association des enseignants et enseignantes francophones du Nouveau-Brunswick
Bathurst Health Community Network
Big Brothers and Sisters of Canada
Burtt, Sandra, B.A.
Canadian Red Cross
Centre d’animation l’Arc-en-Ciel
City of Fredericton
City of Moncton
Clement, Donna
College of Psychologists of New Brunswick
Directrices des programmes d’intervention précoce suivant:
- Bathurst, Caraquet, Edmundston, Grand-Sault, Shippagan et Tracadie
District 16
Dunlap, Jennifer
Early Childhood Stimulation Inc.
Early Intervention Saint John Inc.
Family Services Saint John, Inc.
Forest Hill Elementary School - SPAC
Forest Hill Home and School Committee
Fundy Moms & Babes Breastfeeding Group
Go Ahead Seniors, Inc.
Groupe d’infirmières de la Santé publique - Péninsule Acadienne
Jardine, Hon. Kim
Liverpool Street Elementary School - SPAC
Liverpool Street Elementary Home and School Committee
Materniak, Sue
Moncton Hepatitis C Society
National Indo-Canadian Council
New Brunswick Association of Psychologists & Psychometrists in the Schools
New Brunswick Association of Respiratory Therapists Inc.
New Brunswick Catholic Health Association
New Brunswick Dental Hygienists Association
New Brunswick Easter Seal March of Dimes
New Brunswick Home Support Association
New Brunswick Medical Society
New Brunswick Nurses Union
New Brunswick Partners in Agriculture
New Brunswick Physical Education Society
New Brunswick Teachers’ Federation
New Brunswick Women’s Intercultural Network (NB-WIN)
Nor’East Health Network
Opal III - Fredericton Respite Services Inc.
Oromocto High School Political Science 120
Peters, Debbie
Positive Heart Living Inc.
Region 4 Hospital Corporation
St. John Ambulance
Snow, Claude
South-East Health Care Corporation
Taylor, Joan W.
The New Brunswick Hepatitis C Support Steering Committee
The New Brunswick Research Group on Physical Activity (NBRGPA)
The New Brunswick Senior Citizens Federation
Université de Moncton - Campus de Shippagan
Village of Belledune
Village of Paquetville
Walker, Harry E.
APPENDIX B

Summary of Recommendations

1. Your Committee recommends endorsement of the definition “Wellness is a state of emotional, mental, physical, social and spiritual well-being that enables people to reach and maintain their personal potential in their communities.”

2. Your Committee recommends endorsement of the complementary concepts of health promotion, primary prevention and the determinants of health.

3. Your Committee recommends endorsement and implementation of the Strategic Framework for Wellness, including the Key Elements and five Priorities for Action, with their corresponding Strategic Aims and Objectives, to achieve the goal of helping New Brunswickers to stay healthy longer.

4. Your Committee recommends the establishment of a high-profile focal point for wellness within government, such as a Wellness Secretariat, to:
   a) Work with other departments and stakeholders to coordinate government activities regarding wellness
   b) Be a source of expertise on health promotion and wellness to government departments, community groups, organizations and individuals
   c) Communicate research findings and information to government departments, community groups, organizations and individuals
   d) Release an annual public report (or wellness report card) on the state of wellness in New Brunswick
   e) Facilitate and support a community approach to improve wellness

5. Your Committee recommends the establishment of a high-level interdepartmental coordinating mechanism, such as a Deputy Minister level committee, to develop an action plan, coordinate and follow-up on the implementation of Working Together for Wellness: A Wellness Strategy for New Brunswick. Your Committee further recommends the establishment of a supporting officials level interdepartmental committee.

6. Your Committee recommends that government as a whole, and each government department:
   a) Ensure that all government policies are developed with consideration of the impact on the health and wellness of New Brunswickers
b) Review existing government policies to identify areas that are presently impacting on the health and wellness of New Brunswickers, or impacting on the ability of New Brunswickers to improve their own health

c) Ensure that all government departments explore, identify and document their contribution to wellness in their corporate strategic planning processes and annual reports

d) Incorporate wellness into the government corporate performance measurement system

7. Your Committee recommends that the Regional Health Authorities’ mandate should include a responsibility to address and be accountable for their contribution to wellness. Self-care, primary health care and community health centres that better utilize all health professionals, should be considered as ways to incorporate wellness within the formal health care system.

8. Your Committee recognizes the significant contribution of the many organizations and community groups that work with New Brunswickers to improve their health and quality of life, and recommends that the Regional Health Authorities work together with organizations and community groups to address community health and wellness needs.

9. Your Committee recommends that government work to identify opportunities to:

   a) Work together with other levels of government, the business sector, universities, communities, non-government organizations and community groups to improve wellness

   b) Work together with the other Atlantic Provinces to address wellness issues of common concern. Possible examples for collaboration include chronic disease prevention, physical activity promotion or adult health

   c) Work with the Atlantic Health Promotion Research Centre at Dalhousie University to ensure stakeholders have the best available evidence to address wellness

10. Your Committee recommends that policy development for wellness be an inclusive process that includes an effective means of engaging citizens and people working on the front lines.

11. Your Committee recommends that the federal Romanow Commission address wellness as an important component of an affordable and sustainable health care system.
## APPENDIX C

### Summary of Priorities for Action, Strategic Aims and Objectives

<table>
<thead>
<tr>
<th>Priority for Action</th>
<th>Strategic Aims</th>
<th>Objectives</th>
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<tbody>
<tr>
<td><strong>Healthy Lifestyles</strong></td>
<td>Physical Activity</td>
<td><strong>Objectives:</strong></td>
</tr>
<tr>
<td></td>
<td>Strategic Aim – to increase physical activity levels (i.e. reduce physical inactivity levels)</td>
<td>To promote physical activity for all New Brunswickers</td>
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<tr>
<td></td>
<td></td>
<td>To identify and implement models to encourage all New Brunswick children and youth to be more physically active (e.g., increase/improve physical education in schools, increase participation and reduce access barriers to participation in school and community recreation and sport programs, ensure appropriate access to school facilities for recreation and sport use after hours, etc.)</td>
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<td></td>
<td>To work in partnership with stakeholders to increase participation of New Brunswickers in physical activity</td>
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<td>To support the 1997 agreement by Federal, Provincial, and Territorial Ministers of Physical Activity, Recreation and Sport to “reduce physical inactivity” by 10 percent between 1998 and 2003</td>
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<td></td>
<td>To promote and use Health Canada’s <em>Canada’s Physical Activity Guide to Healthy, Active Living</em> (1998) and <em>Canada’s Physical Activity Guide for Older Adults</em> (1999)</td>
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<tr>
<td></td>
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<td>To promote the use of Health Canada and the Canadian Council for Health and Active Living at Work’s <em>The Business Case for Active Living at Work</em> (2001)</td>
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<td></td>
<td>To review and promote the use of Health Canada’s <em>Canada’s Physical Activity Guide to Healthy, Active Living for Children and Youth</em> when it is released in Fall 2001</td>
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<td></td>
<td>Key Departments: Culture and Sport Secretariat, Education, Health and Wellness</td>
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<tr>
<td><strong>Nutrition</strong></td>
<td>Strategic Aim – to increase adoption of healthy eating habits and maintenance of healthy weight</td>
<td><strong>Objectives:</strong></td>
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<tr>
<td></td>
<td></td>
<td>To promote healthy eating habits for all New Brunswickers</td>
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<td></td>
<td>To identify and share information about best practices, programs and existing community initiatives, that promote and support healthy eating for at risk groups such as teenage mothers, low income families, and frail seniors (e.g., group food purchase programs, First Steps, Meals on Wheels, Wheels to Meals, etc.)</td>
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<tr>
<td></td>
<td></td>
<td>To promote and use Health Canada’s <em>Canada’s Food Guide</em></td>
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<td>Key Departments: Health and Wellness, Education, Family and Community Services</td>
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<tr>
<td><strong>Tobacco/Smoking</strong></td>
<td>Strategic Aim – to increase the percentage of non-smokers</td>
<td><strong>Objectives:</strong></td>
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<tr>
<td></td>
<td></td>
<td>To increase the number of children and youth who stay smoke-free</td>
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<td></td>
<td>To increase the number of smokers who quit and remain smoke-free</td>
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<td>To identify and share information about best practices, programs and existing community initiatives that encourage children and youth to be non-smokers (e.g., Ridgewood Addictions Peer Led Tobacco Cessation Program)</td>
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<tr>
<td>Addictions</td>
<td>Objectives:</td>
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</table>
| Strategic Aim – to reduce the incidence of addiction-related problems (including alcohol, drug and substance abuse, and gambling) | • To put more emphasis on prevention of addictions  
• To promote, encourage and support community development approaches to prevent addictions  
• To identify and share information about best practices, programs and existing community addictions initiatives  
• To develop and support effective social marketing initiatives about addictions  
• To integrate or link Public Health and Addiction Services prevention efforts, where appropriate |

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<tr>
<th>Children and Youth</th>
<th>Objectives:</th>
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</table>
| Prenatal Period | • To promote healthy lifestyles during pregnancy  
• To promote the benefits of breastfeeding  
• To work to identify and remove barriers to the adoption of healthy lifestyles during pregnancy, and the decision to breastfeed, especially for at risk groups, including teenagers and low income mothers  
• To encourage prenatal programs to address breastfeeding, parenting skills, life skills, and healthy lifestyles for all New Brunswickers  
• To encourage and promote awareness of community prenatal programs and community groups that provide breastfeeding advice and support  
• To raise awareness of community programs that address both prenatal and postnatal care for at risk groups, including pregnant teenagers and low income mothers (e.g., First Steps) |

<table>
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<tr>
<th>Postnatal Period</th>
<th>Objectives:</th>
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</thead>
</table>
| Strategic Aim – to promote and support breastfeeding and postnatal support | • To support new mothers and families in the postnatal period  
• To promote and support breastfeeding  
• To identify best practices that support mothers who choose to breastfeed in the early days and weeks, both in the hospital and at home (e.g., support in hospitals, public health nurse visits, community support groups, etc.)  
• To promote awareness of community support groups and other programs that provide postnatal support  
• To examine the benefits, risks and outcomes of early discharge policies and evaluate the role of community follow-up programs |
<table>
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<tr>
<th>Age Group</th>
<th>Strategic Aim</th>
<th>Objectives</th>
</tr>
</thead>
</table>
| Early Childhood        | To promote and support early childhood development | To promote and support healthy lifestyles (including healthy eating habits and physical activity)  
To promote literacy  
To promote the development of social skills  
To promote parenting skills education  
To support families and communities  
To increase access to quality, affordable childcare. To ensure appropriate screening of all pre-school children to identify developmental and health problems  
To build on the existing Early Childhood Initiatives Program  
To promote and support healthy school environments, including good air quality  
To encourage sharing of best practices among school districts that have developed air quality policies or other “healthy” policies  
To review and implement the existing school food and nutrition policy that supports healthy eating habits  
To provide appropriate access to school facilities for community and recreational use after-hours  
To encourage and support parents and families  
To review and improve the life skills curriculum to ensure that all students have access to life skills education  
To provide appropriate health education (including healthy lifestyles, mental health, etc.) and life skills education  
To identify opportunities and explore models to integrate healthy lifestyle concepts into the whole school curriculum  
To review and improve the life skills curriculum to ensure that all students have access to life skills education  
To promote the development of good social skills, encourage respect for others, and reduce bullying  
To promote literacy  
To promote and support healthy school environments, including good air quality  
To encourage sharing of best practices among school districts that have developed air quality policies or other “healthy” policies  
To review and implement the existing school food and nutrition policy that supports healthy eating habits  
To provide appropriate access to school facilities for community and recreational use after-hours  
To encourage and support parents and families  
To review and improve the life skills curriculum to ensure that all students have access to life skills education  
To promote healthy lifestyles  
To promote healthy lifestyles (including tobacco and addictions)  
To prevent unwanted pregnancies  
To provide information on healthy lifestyles and health issues for youth  
To promote and support suicide prevention  
To review current health and related programs to ensure all students have access to information and programs that address family life, healthy eating and cooking, mental health, body image, relationships, etc.  
To review and improve the life skills curriculum to ensure that all students have access to life skills education  
To promote healthy lifestyles (including tobacco and addictions)  
To prevent unwanted pregnancies  
To provide information on healthy lifestyles and health issues for youth  
To promote and support suicide prevention  
To review current health and related programs to ensure all students have access to information and programs that address family life, healthy eating and cooking, mental health, body image, relationships, etc.  
To review and improve the life skills curriculum to ensure that all students have access to life skills education  |
| School-Age (Kindergarten, Elementary and Middle School) | To promote healthy lifestyles for school-age children and healthy school environments | Key Departments: Family and Community Services, Health and Wellness, Education, Literacy New Brunswick  
To promote and support healthy lifestyles (including healthy eating habits and physical activity)  
To promote literacy  
To promote the development of social skills  
To promote parenting skills education  
To support families and communities  
To increase access to quality, affordable childcare. To ensure appropriate screening of all pre-school children to identify developmental and health problems  
To build on the existing Early Childhood Initiatives Program  
To promote healthy lifestyles  
To provide appropriate health education (including healthy lifestyles, mental health, etc.) and life skills education  
To identify opportunities and explore models to integrate healthy lifestyle concepts into the whole school curriculum  
To review and improve the life skills curriculum to ensure that all students have access to life skills education  
To promote the development of good social skills, encourage respect for others, and reduce bullying  
To promote literacy  
To promote and support healthy school environments, including good air quality  
To encourage sharing of best practices among school districts that have developed air quality policies or other “healthy” policies  
To review and implement the existing school food and nutrition policy that supports healthy eating habits  
To provide appropriate access to school facilities for community and recreational use after-hours  
To encourage and support parents and families  
To review and improve the life skills curriculum to ensure that all students have access to life skills education  |
| Youth (High School and up) | To promote healthy lifestyles for youth | Key Departments: Education, Health and Wellness, Literacy New Brunswick  
To promote healthy lifestyles (including tobacco and addictions)  
To prevent unwanted pregnancies  
To provide information on healthy lifestyles and health issues for youth  
To promote and support suicide prevention  
To review current health and related programs to ensure all students have access to information and programs that address family life, healthy eating and cooking, mental health, body image, relationships, etc.  
To review and improve the life skills curriculum to ensure that all students have access to life skills education  |
<table>
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<tr>
<th>Seniors</th>
<th>Strategic Aim – to promote and support healthy aging</th>
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<tbody>
<tr>
<td></td>
<td>Objectives:</td>
</tr>
<tr>
<td></td>
<td>• To promote physical activity, active living and healthy lifestyles for seniors</td>
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<td></td>
<td>• To promote and support healthy lifestyles (including healthy eating habits) for seniors, and especially for frail or isolated seniors (e.g., Meals on Wheels, Wheels to Meals, food purchasing and delivery groups, etc.)</td>
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<td></td>
<td>• To encourage community groups to build social support networks for frail or isolated seniors (mail carrier check-in programs, etc.)</td>
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<td></td>
<td>• To explore opportunities to provide information to seniors and their families on existing community programs and services for seniors in appropriate formats (e.g., phone-in services, newspaper, Internet, etc.)</td>
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<td></td>
<td>• To recognize and celebrate seniors’ contributions to their communities through volunteerism</td>
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<td>• To promote and support seniors’ activities and events across the province (e.g., Seniors Games)</td>
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<td>• To continue to work to address the factors that impact on health (e.g., income support, housing options, elder abuse, etc.)</td>
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<td></td>
<td>• To identify best practices, programs and models to address medication misuse</td>
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<tr>
<td></td>
<td>Key Departments: Culture and Sport Secretariat, Family and Community Services, Health and Wellness</td>
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<tr>
<th>Communities</th>
<th>Strategic Aim – to promote healthy communities</th>
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<tbody>
<tr>
<td></td>
<td>Objectives:</td>
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<tr>
<td></td>
<td>• To promote a community development approach to wellness issues that identifies and builds on community strengths (e.g., healthy communities movement)</td>
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<td></td>
<td>• To provide training and expertise to assist community groups to design and implement asset-based community development approaches to address wellness issues</td>
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<td></td>
<td>• To encourage the development of community information sharing networks</td>
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<td></td>
<td>• To compile and share information on New Brunswick community wellness related programs (e.g., an Internet clearinghouse or “sharinghouse” of community wellness initiatives, an annual report/inventory of community wellness related initiatives, etc.)</td>
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<tr>
<td></td>
<td>• To encourage and recognize community volunteerism</td>
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<td>• To recognize community initiatives that make a difference to wellness</td>
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<td></td>
<td>• To ensure appropriate policies that will allow community groups to access school and other public or government owned buildings after hours</td>
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<td>• To ensure that the Regional Health Authorities link or partner with community groups to determine community wellness needs and goals</td>
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<td></td>
<td>• To explore and develop incentives for communities to encourage them to address wellness issues</td>
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<td></td>
<td>Key Departments: Health and Wellness, Environment and Local Government, Culture and Sport Secretariat</td>
</tr>
<tr>
<td>Workplace Wellness</td>
<td>Strategic Aim – to promote workplace wellness</td>
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<tr>
<td></td>
<td>Objectives:</td>
</tr>
<tr>
<td></td>
<td>• To promote workplace wellness programs</td>
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<tr>
<td></td>
<td>• To ensure that the Government of New Brunswick is a role model re workplace wellness</td>
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<td></td>
<td>• To promote the benefits of workplace wellness programs to Employers (e.g., via a campaign)</td>
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<td>• To identify and develop options to address the challenges of small business to offer workplace wellness programs (e.g., networking, partnerships, etc.)</td>
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<td>• To recognize workplaces that are role models for wellness</td>
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<td></td>
<td>• To explore and develop incentives for Employees who participate in workplace wellness programs</td>
</tr>
<tr>
<td></td>
<td>• To explore and develop incentives for Employers who offer workplace wellness programs</td>
</tr>
<tr>
<td></td>
<td>• To determine the appropriate “provincial government home” for the promotion of workplace wellness (e.g., Health and Wellness, Workplace Health Safety and Compensation Commission, Training and Employment Development, etc.)</td>
</tr>
<tr>
<td></td>
<td>• To support and promote Health Canada and the Canadian Council for Health and Active Living at Work’s <em>The Business Case for Active Living at Work</em> (2001)</td>
</tr>
</tbody>
</table>

Key Departments: Training and Employment Development, Workplace Health, Safety and Compensation Commission, Health and Wellness, Culture and Sport Secretariat