COMMUNITY LOCATIONS

- Toquaht
- Ahousaht
- Ditidaht
- Hesquiaht
- Hupacasath
- Tla-o-qui-aht
- Tseshaht
- Huu-ay-aht
- Uchucklesah
- Yuułuʔiłʔatḥ
- Ucluelet
- Tofino
- Bamfiled
- Port Alberni

ELECTORAL AREAS

- ARCD Area
- Bamfield 'Area A'
- Beaufort 'Area B'
- Beaver Creek 'Area E'
- Cherry Creek 'Area F'
- Long Beach 'Area C'
- Sproat Lake 'Area D'

West Coast Communities

Alberni Valley Communities (Multiple Electoral Areas)

Barkley Communities

2024 STRATEGIC PLAN

ALBERNI CLAYOQUOT HEALTH NETWORK

CONTENTS

ACHN GOVERNANCE

ACHN MECHANISMS

ACHN STRATEGIC PRIORITIES

ACHN Review

The Alberni Clayoquot Health Network (ACHN) formed in 2012 following a series of three meetings in 2011 to gauge interest in establishing a health network for the Alberni Valley, Clayoquot and Barclay Sound region. The initial work of the ACHN was supported with a grant from Island Health in February 2012 and ACHN allocated a budget to enable this funding to be used over several years, developing a Memorandum of Understanding with the Alberni Clayoquot Regional District to be the fiscal host for these funds.

A strong will for the ACHN to reach out and involve the community emerged; to ensure the community at large had an ability to bring forward issues, ideas, and concerns for consideration. The Network identified that actions are to be informed by:

- Stories, opportunities, planning, and evidence;
- Collaborative consultation and conversations;
- Community and political readiness;
- And alignment with ACHN's values.

Governance, operating practices and values for the Network were built to facilitate and strengthen these principles while enhancing the community development focus of the Network.

Now in our 12th year of operation, we have seen significant progress on identified priorities and an ever growing local will to build healthy communities in the Alberni Clayoquot Region. Since our 2018 Strategic Plan we have utilized network mechanisms to identify, plan and implement meaningful upstream interventions that impact the health of communities in our region.

Significant highlights of our work to date include:

Network Development

- A functioning network of networks which includes diverse representation at the Table of Partners and working groups as well as strong regional relationships.

Connected Communities.

- Significant advocacy, planning and implementation support for transportation projects that impact health equity.
- Reinstatement of non emergency medical transportation for rural and remote communities.
- Implementation of a transit system connecting West Coast communities.

Poverty Reduction

- The 2022 Alberni Clayoquot Poverty Reduction Action Plan.
- Commitment to equity building projects which include Decolonize First workshops delivered to 70 participants in the Alberni Clayoquot and a Equity Building Toolkit for decision makers.
- Alberni Clayoquot Communities Building Youth Futures project which brought $700,000 to regional youth planning and capacity building from 2022 – 2024. This project has left a lasting impact with the development of youth safe spaces in the Alberni Valley, Barkley and Westcoast Communities as well as youth facilitator roles which have been maintained in Barkley and Westcoast communities.

Mission, Vision and Values

MISSION

The Alberni Clayoquot Health Network is a community driven collective which builds partnerships and capacity through out the Alberni Clayoquot to affect action around complex social issues.

VISION

The Network builds a common understanding of the Social Determinants of Health in the Alberni Clayoquot to envision systemic change and act around health equity, sustainable communities, and justice.

VALUES

1. Hishukishṭswalk – We recognize that the Health Network exists within the ḥahuuɫi of the Nuu-chah-nulth People. We strive to find culturally appropriate pathways to collaborate, plan and work together that legitimize traditional knowledge, wisdom, and the lived experience of people. We acknowledge the interconnectedness of our region, the lands, people, elements, successes, and challenges.

2. ʔiisaak– We hold up respect and responsibility in our work and relationships. We share knowledge, listen to understand, explore ideas, and apply information together to generate understanding and solutions.

3. Ongoing Learning – We value people's contributions and are mindful and respectful of differing opinions. We embrace many ways of knowing, aiming to enhance and grow our understanding with multiple avenues of information. Our network learning and unlearning is a nonlinear process allowing for a process improvement approach where differing worldviews to come together.

4. Relationships – We have accountability and responsibility to hold relationships in value, with dignity and respect. We take time to cultivate relationships, connecting people and ideas with purpose and intention. The table promotes a culture of active participation, sharing of community assets and resources across the region.

5. Equity – The Alberni Clayoquot is an expansive rural and remote region covering 6577 km2 including three municipalities, ten Nuu Chah Nulth Nations and six Electoral Areas within its boundaries. We acknowledge that local realities, population demographics, socioeconomics and health indicators can vary significantly between people, communities, and regions. We work to increase equity within these realities, ensuring that all residents of the Alberni Clayoquot have access to the resources which assist them in building good health.

6. Sustainability – We are accountable with the resources entrusted to us, in our planning and actions. We recognize the interconnectedness and relationship between the land and environment on our health. We promote a collaborative approach to planning and project implementation which takes these synergistic relationships into account.

7. Innovation - We aspire to constantly evolve, elevate, and optimize ways to better serve and empower our communities. We embrace experimentation and creative thought, employing a regenerative process to explore, develop, grow, mature, and release actions in our approach.

ACHN Principles of Purpose and Good Relations

The work of the Alberni Clayoquot Health Network is guided by the following principles. These principles inform the structure and development of our meetings, governance, and the implementation of our projects. We aim to engage meaningfully with communities of the Alberni Clayoquot to move forward systemic change and build healthy communities that work for all people.

Social Determinants of Health

- We recognize that over 60% of health outcomes are shaped by the 12 Social Determinants of Health.
- We work to promote upstream interventions to support our health partners in their work.
- We promote a focus on building healthy communities with local governments and community stakeholders.

Equity

- We center our work in the 4 aspects of equity;
- Procedural – representation in the process
- Distributional – increasing access to the most underserved
- Structural – acknowledgement of underlying structural and institutional systemic challenges.
- Transgenerational – impact of action or failure to act on future generations
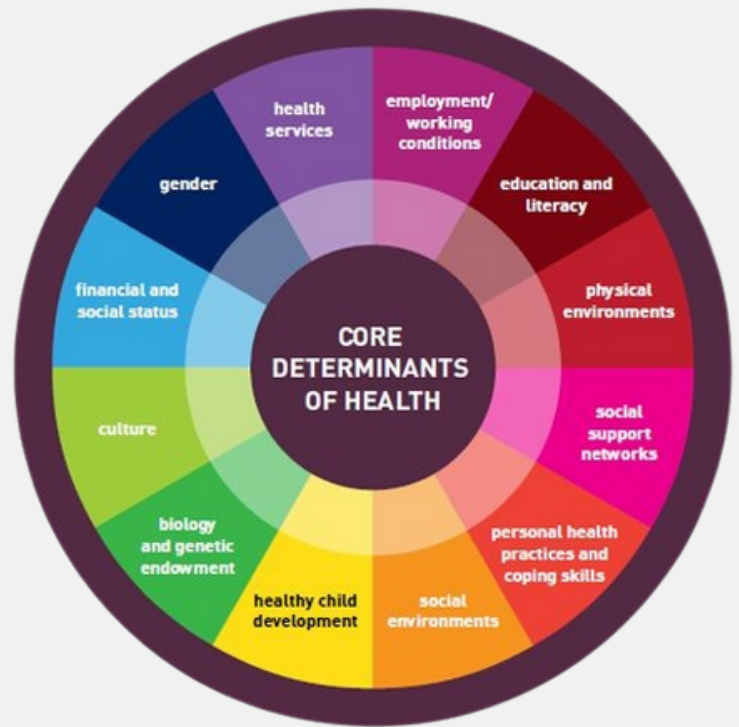
Systems Change

- We are tough on systems and soft on people.
- We work to identify and address root causes of systems inequity.
- We utilize frameworks such as Collective Impact to guide our work.
- We promote information sharing, collaboration and collective resource planning.
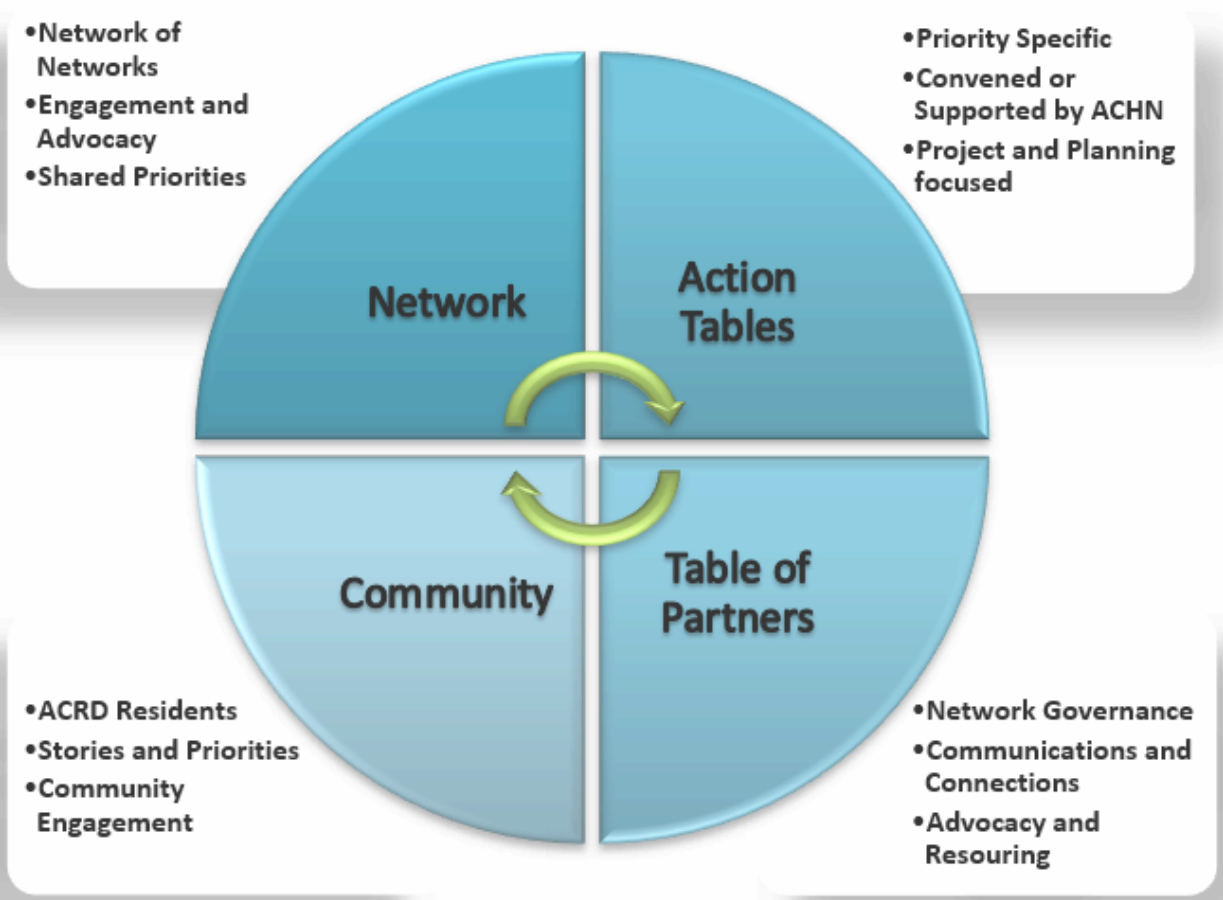- We allow for experimentation and learning in our process.

Anti-Racism

- We reflect on our intentions by practicing WAIT – Why Am I Talking.
- We reflect on the dynamics of White Supremacy Culture and reflect on how we can improve our work through this lens.
- We practice active listening and reflect this in our processes.

Decolonization

- We commit to learning about principles of decolonization individually and as a network.
- We challenge the status quo and look for inclusive ways to work together.
- We are nimble in our network structures to ensure relationship and trust are centred in all our work.
- We recognize this work takes time and dedication to learning and unlearning.

- Network of Networks
- Engagement and Advocacy
- Shared Priorities

- Priority Specific
- Convened or Supported by ACHN
- Project and Planning focused

Network

Action Tables

Community

Table of Partners

- ACRD Residents
- Stories and Priorities
- Community Engagement

- Network Governance
- Communications and Connections
- Advocacy and Resouring

ACHN Structure

The purpose of the ACHN is to improve community health; we do this through a number of mechanisms. We focus on network like-minded organizations, agencies, and networks, we "network the networks", to better support the work you are already doing. Rather than create additional work, meetings or duplicate what you do best we would like to meet you where you are to assist in providing supports to work more effectively as a region.

To do this, we aim to host or support regional network gatherings which can be learning events, planning events and/or networking events – based on your feedback.

We look for innovative and equitable ways to bring information and stories from our local communities into planning processes. We ensure that priorities are informed by community through a variety of engagement activities like events, outreach, surveys, interviews other forms of engagement focused on listening to community to set priorities.

As we move forward in our work and focus on equity, we center our work in building relationships and creativing sustainable ways to support community engagement and input in processes.

To ensure that priorities move forward, and identified actions are implemented, we provide project management through the ACHN Coordinator role. We convene and support action tables that are composed of community partners, stakeholders, and rights-holders. This network approach allows us to tackle issues that no one community, organization, or group can take on independently.

Lastly our Table of Partners is a focused leadership table that help to expedite decisions and leverage resources. To ensure good governance and accountability information follows to the network and back into the communities through these partners. This small committed group meet monthly to assist ensuring the ACHN is accomplishing its goals.

How We Collaborate

The Alberni Clayoquot Health Network is a dynamic partnership which would not be possible without annual funding from Island Health, fiscal hosting and buy in from the Alberni Clayoquot Regional District (ACRD), and representatives from local government, community organizations and other like minded networks committed to building healthy communities in the region. To action this partnership the ACHN contracts a coordinator through the ACRD who is charged with making connections, facilitating network activities and project management. To ensure collaborative decision making, resource allocation and equity the ACHN Table of Partners sources representatives from across the region to share information, approve high level planning and budgets and support the work of the network. The ACHN Table of Partners meets monthly and are open to all members of the community to participate. The Network aims to act as a catalyst for community health and well being initiatives through advocacy, project development and management and community engagement.

We Prioritize...

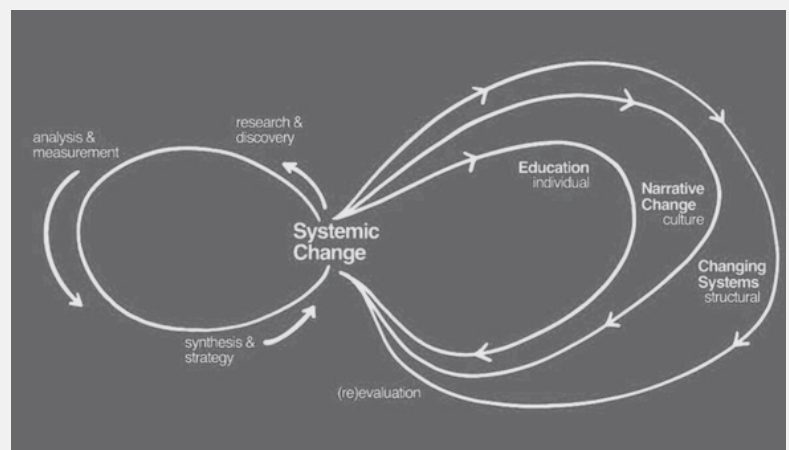The use of a *Constellation Model* to organize:

Working groups and action tables are tasked and organized as needed. The coordinator works to ensure the right partners are at the table and defines the network's role as participant, supporter, or convener and moves forward work between meetings.

A focus on *Up Stream Interventions:*

We support the work of our local decision makers, health and social community partners by identifying and addressing the root causes of poor health, inequity and social challenges. We recognize that these complex issues require long term planning and upstream interventions to move the needle on community health.

Collective Impact, Collaborations and Systemic Change

We participate, support and convene conversations that matter with an aim to increase regional equity and attention to healthy community development. We recognize that no one organization, local government or individual can tackle the complex social issues we face today. As such we aim to network the networks, convening and supporting work through an equity lens. We participate in collaborations which seed education, collective action and systems reform.

2024 Strategic Planning Process

In summer 2023, the ACHN began a strategic planning process involving community engagement, evaluation, and facilitated dialogue. This process ran from July to November. The ACHN Coordinator collaborated with the Table of Partners and regional partners to distribute surveys and conduct interviews with stakeholders and long-time supporters. Insights gathered were discussed in a facilitated session with the Table of Partners in November 2023. During this hybrid session, achievements since the 2018 Strategic Plan were celebrated, and new priorities were set for network activities moving forward.

Key Achievements:
- Secured $700,000 for youth capacity funding via the CBYF project.
- Developed the Alberni Clayoquot Poverty Reduction Action Plan.
- Enhanced transportation access through Island Health non-emergency medical transport and Westcoast Transit.
- Created Building Equity Workshops and a Toolkit.
- Strengthened ACHN relationships and network participation.

New Priority Areas:
1. Network Development
2. Communications and Engagement
3. Poverty Reduction

The team revised ACHN governance documents and statements based on session feedback and formalized this work Spring of 2024. The updated Strategic Plan was presented in Fall 2024.
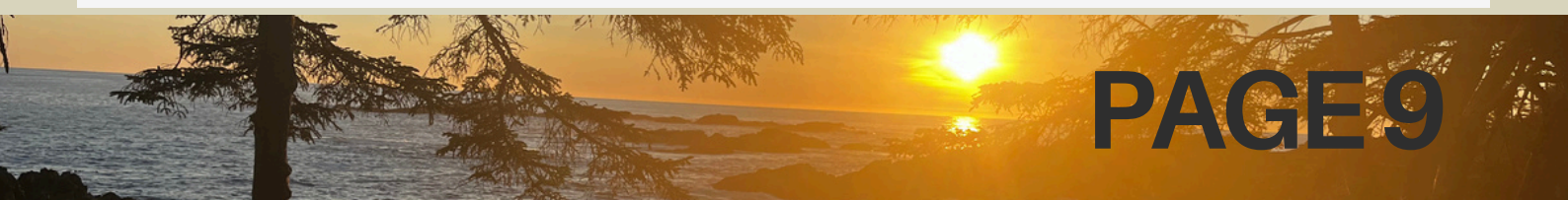
Goal 1 - Network Development

Network Development activities articulate how the ACHN builds capacity with in the Alberni Clayoquot Region to identify, amplify and collaboratively act on issues of health equity, social and structural determinants of health.

Objective and Scope	Network Activities	Stakeholder Activities	Outcome Areas
1.1 Guide Vision and Strategy - Foster and Support Collaborative Culture - Collective Leadership around health and SDoH - Support health related messaging and communications	Lay the groundwork for collaborative action on regional issues through support, modelling, design and convening of activities.	Active ToP to identify, communicate and collaborate on health issues.	# of connections # of workshops/ learning events # of presentations to ToP # of opportunities to collaborate # of ToP meetings Diversity of ToP and other participants.
	Support, plan, and promote education, capacity building and collaborative culture.	Share Network news and bring info to network.	
	Connect stakeholders, ideas and resources.	Collaboration on identified shared priorities. Active participation. Information provision.	
	Quality ACHN Table of Partners meetings, working groups and action tables.		
1.2 Support Aligned Activities - Networking the networks - Support existing networks through education, capacity and modeling	Connect topics and stakeholders to increase impact.	Active participation. Information provision. Identification of partners and opportunities to support.	# of projects supported # of networks participating # of action tables and working groups Increase in regional collaboration
	Facilitate links through participation and communications.		
	Collaboration and supports to local networks, initiatives and other Island CHN's.		
	Develop, maintain and/or support coalitions, working groups, action tables and events which align with ACHN priorities.	Participation in activities, knowledge sharing and learning.	
1.3 Build Public Will - Gather and distribute regional data and needs - Develop and provide education around identified priorities. - Develop and maintain relationships and tools build and enhance collective messaging.	Drawing together community and political constituencies on related health issues.	Identification of opportunities and needs.	# of communications # of presentations # and size of information sharing gatherings (in person or via email) # of new stakeholders # of events supported or convened
	Presentations to local leadership tables to highlight SDoH priorities, data, and information.	Information identification, distribution and support.	
	Recruitment of ToP and Action Table members.	Information identification, distribution and support. Participation in process.	
	Utilize ACHN model, tools, partners and regional planning to identify priorities.		
1.4 Mobilize Support - Utilize ACHN model and community stakeholders to increase impact - Support fund development - Leverage resources strategically and equitably	Lead or support fund and resource development and processes.		# of opportunities identified # of initiative's and projects actioned $$ leveraged
	Broaden awareness and increase impact of priorities and associated need/solution.	Participation in process. Providing information, local perspectives and knowledge. Assisting in resource identification and allocation.	
	Support and were necessary lead project management and implementation efforts.		

Goal 2- Communications and Engagement

Communications and Engagement activities provide a framework for how the ACHN engages with community. Providing support,convening opportunities, tools, data, and activities which amplify shared priorities to build health and equity in communities.

Objective and Scope	Network Activities	Stakeholder Activities	Outcome Areas
2.1 Guide Vision and Strategy - Convene community knowledge holders - Develop and maintain communications tools - Engage community stakeholders	Develop and maintain communications tools for planning and needs identification.	Active ToP to identify, communicate and collaborate on health issues.	# of communication tools developed # of communications tools and opportunities # FB and Website metric's # of stakeholders engaged
	Utilize framework and tools to increase visibility of priorities.	Share Network news and bring info to network.	
	Communications (FB, email, web) Creation of marketing and generic communications tools – issue specific one pagers, research summaries, policy briefs, etc.		
	Develop and resource meaningful mechanisms for ongoing community and stakeholder engagement.	Collaboration on identified shared priorities. Active participation. Information provision.	
	Update communications and engagement plan.		
2.2 Support Aligned Activities - Convene and support planning - Support engagement and community connections - Network the networks	Convene and support regional planning and priority identification.	Active participation. Information provision. Identification of partners and opportunities to support. Participation in activities, knowledge sharing and learning.	# of planning sessions # of action table meetings # of opportunities to present priorities /regional work # of connections # of workshops/ learning events # of opportunities to collaborate # of projects Amount of community feedback/ engagement Notable quantitative or qualitative changes to community prosperity
	Participate, collaborate, support and convene related networks and working groups.		
	Utilize framework to identify, support and implement projects.		
	Source, monitor, and communicate data relating to priorities.		
2.3 Build Public Will - Communications – info sharing - Education and support - Data collection, presentation and dissemination	Facilitate linkages to information between projects and community stakeholders.	Identification of opportunities and needs. Information identification, distribution and support.	
	Amplify community and partner projects and education.	Information identification, distribution and support. Participation in process.	
	Work across networks and regions to amplify health equity planning, initiatives and policy.		
	Keep ACHN website up to date with interactive information and tools to highlight initiatives.	Provide content and share website as a resource.	
2.4 Mobilize Support - Actively promote social determinants of health and equity recommendations - Advocate for identified solutions - Leverage resources for identified priorities	Develop communications for identified priorities– project briefings, data briefings, one pagers, updates to action plans and plan on a page.	Participation in process. Providing information, local perspectives and knowledge. Assisting in resource identification and allocation.	
	Utilize ACHN framework to bring forward regional needs.		
	Identify, articulate and action ways to better engage priority populations and people with experience.		

Goal 3 - Poverty Reduction

Poverty Reduction actions and activities articulate how the ACHN will advance recommendations identified in the 2022 Poverty Reduction Action Plan. Working with community stakeholders and partners to identify short and long term actions which will increase equity, access to basic needs and prosperity in the region. The ACHN will maintain momentum and stakeholder participation in priorities related to youth capacity building, equity, transportation and access.

Objective and Scope	Activities	Measurement	Health Related Outcomes
3.1 Guide Vision and Strategy - Maintain communications and conversation - Convene community stakeholders - Cumulate information and data	Update Action Plan data and identify data needs. Communicate poverty reduction priorities and successes. Create Action Plan one pagers. Develop baselines and monitoring framework.	# of communication tools developed # of priorities and opportunities identified # of activities convened or supported # of projects linked to action plan Working group/action tables and involvement # of media engagements # of presentations Amount of community feedback/ engagement Notable quantitative or qualitative changes to community prosperity	- 13.6% of Pop. Living in Low Income based on Low- Income Measure, after tax (LIM-AT) - 19.7% of renters spending more than 30% of their income on housing* - A child poverty level of 22.4% in the Alberni Clayoquot ** - 4th highest rates of child poverty out of 29 Regional Districts in BC
3.2 Support Aligned Activities - Communications development and maintenance - Convene action planning - Support evaluation	Sustained action with community and partners through existing networks and convened tables as needed. Participation on Provincial and National tables to amplify local priorities while support local learning and efforts. Update monitoring based on community input and action. Support and maintain youth engagement and capacity building. Support and maintain health equity projects, advocacy and evaluation. Increase ability to track and celebrate contributing work of community stakeholders through ACHN mechanisms.		
3.3 Build Public Will - Communications and education projects - Convene community engagement and information opportunities	Convene and support workshops, community engagement and information opportunities. Increase communications around local work and local priorities. Build awareness of poverty reduction initiatives and priorities. Convene and support community engagement, amply priorities and stories. Convene and support action tables as needed.		
3.4 Mobilize Support - Transform advocacy to solutions - Define opportunities and maintain engagement with all levels of leadership	Continue provincial and federal information provision, involvement and influence. Maintain presentations and awareness building. Ensure ongoing dialog for resource needs, opportunities and awareness of local planning.		

*Sourced from Local Health Area Profile. 2021.
** First Call Child Poverty Report 2023

Evaluation

The ACHN Coordinator provides monthly reports to the Table of Partners based identified activities to track and evaluate progress on projects and priorities. Annual progress reports are prepared for communications to community as well as to funders. The ACHN will set benchmarks for meaningful change based on identified health indicators and poverty reduction priority areas. Additional opportunities to evaluate Network activities, strengths and areas for development will be sought out and utilized as resources allow.

This is a living document meant to grow and evolve with the community and work required. It is to be used as a guide for action, evaluation and progress for the ACHN work in the next three to five years.