



Shadow Health Community Health Debriefing Faculty Guide

This guide will provide comprehensive faculty debriefing resources for the Shadow Health Community Health DCE assignments. Debriefing resources will include key takeaways, customizable questions, and scripted prompts to facilitate discussion.

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Introduction and Utilization

Debriefing after a patient encounter is a crucial component of nursing education, offering students a structured opportunity to reflect on their clinical experiences. It allows them to process what occurred, analyze their clinical decision-making, and gain insight into their strengths and areas for improvement. The same is true after nursing students go through a Shadow Health patient encounter. Through guided discussion, students can connect theory to practice, reinforce clinical skills, and deepen their understanding of patient-centered care. Debriefing also fosters critical thinking, emotional intelligence, and professional development by encouraging open dialogue about challenges, ethical dilemmas, and interpersonal communication. Ultimately, it enhances learning outcomes and prepares nursing students for real-world practice by transforming experience into meaningful growth.

This document will go through each of the assignments in the Community Health Digital Clinical Experience (DCE), and give you some ideas on how to debrief with your students in a meaningful way. Pick and choose from a list of questions to customize the discussion for your students or follow our script to help create a meaningful discussion and learning opportunities for your students.

Debrief Focused Exam: Welcome to Shadowville

10 Minutes or Less

If you have 10 minutes or less, choose a few key questions from this list to focus your debrief and highlight the most important takeaways for your students:

1. What quantitative data (demographics, morbidity/mortality rates, epidemiologic data) and qualitative data (community observations, resident concerns) did you collect about Shadowville? How did you organize and analyze these data to identify health patterns?
2. What deviations from expected or acceptable rates of disease, injury, or risk factors did you identify? What benchmarks or comparison data did you use?
3. How did you determine which health problems to prioritize? What role did community beliefs, attitudes, and readiness for change play in your priority-setting process?
4. Community Planning must be based on the community's problems AND its strengths. What community assets and resources did you identify that could support health improvement efforts?
5. What social determinants of health (environmental factors, access to services, economic conditions) did you identify in Shadowville? How do these determinants influence the population's health status?
6. Describe the structure of Shadowville (physical environment, resources), its people (demographics, health behaviors), and social systems (healthcare services, government agencies, schools). How do these three components interact to affect community health?
7. What population-focused nursing interventions would you recommend based on your assessment? How do these differ from individual-level interventions?
8. How would you ensure community stakeholders support your proposed interventions? Why is community buy-in essential for program success?
9. What evaluation measures would you establish to determine if your interventions successfully address Shadowville's priority health problems? How would you measure community satisfaction with outcomes?
10. If your proposed interventions don't resolve the identified problems to the community's satisfaction, what would be your next steps in the nursing process?

If you're really short on time, we can suggest the following 3 questions as some of the most important takeaways from this scenario:

1. What community health priorities did you identify in Shadowville, and how did you use both data and community input to determine which problems to address first?
 - This question connects assessment to clinical reasoning and emphasizes that priorities must reflect both epidemiologic evidence and community values—not just instructor assumptions.
2. What social determinants of health did you observe in Shadowville, and how do these factors influence the population's ability to achieve better health outcomes?
 - This promotes systems thinking and helps students recognize that individual health behaviors exist within broader structural contexts—essential for population-focused nursing.
3. What population-level interventions would you recommend, and how would you engage community stakeholders to ensure your plan is feasible, acceptable, and sustainable?
 - This bridges assessment to action while emphasizing partnership and the difference between top-down programs and community-driven solutions.

30 Minutes or More

If you have 30 minutes or more to debrief with students, we recommend following our debriefing script to support a thoughtful and comprehensive reflection.



Opening

- Let's gather what happened during your Shadowville assessment. Describe the data you collected and what you observed.
 - What demographic, epidemiologic, and environmental data did you find?
 - What community resources and services did you identify?
 - What stood out as unexpected or concerning?
- Facilitation tip: Chart responses without judgment. Focus on facts, not interpretations yet.

Analysis

- Now let's analyze what this means.
 - How did you make sense of the data to identify priority health problems?
 - What social determinants of health did you recognize, and how do they influence population health outcomes?
 - How did you balance epidemiologic data with community strengths and resident priorities?
 - What's the difference between addressing individual health needs versus population-level problems?
- Facilitation tip: Push students beyond surface observations to systems thinking and root causes.

Summary

- Let's summarize the key takeaways.
 - What will you carry forward into community health nursing practice?
 - How does community assessment differ from individual patient assessment?
 - Why is stakeholder engagement essential throughout the nursing process at the population level?
 - What's one insight about social determinants or population health that changed your thinking?

Closing

- Community health nursing starts where the people are. Your assessment is the foundation for partnering with communities to create meaningful, sustainable change. Excellent work today.

Debrief Focused Exam: Community Assessment

10 Minutes or Less

If you have 10 minutes or less, choose a few key questions from this list to focus your debrief and highlight the most important takeaways for your students:

1. Did you notice any patterns that would help you identify priority health problems for Shadowville?
2. Describe any expected community health indicators you found interesting. Were they an indication of poor community health? What evidence can you use to support your conclusion?
3. Walk through your clinical reasoning process: Did you recognize any community-level health patterns? What cues prompted you to investigate certain areas more deeply?
4. What objective data (statistics, environmental observations, resource availability) and subjective data (community member perspectives, concerns) did you gather? How did these complement each other in forming your assessment?
5. How could you build trust and establish therapeutic relationships with community members or stakeholders if you were to meet them during your assessment? What communication strategies would be most effective?
6. What specific physical characteristics did you observe about the community's environment (housing quality, street conditions, green spaces, abandoned buildings)? What do these observations suggest about community resources and safety?
7. Reflect on how you would convey community concerns to stakeholders.
8. Describe your problem list for Shadowville. How did you prioritize the most important or active health problems? What criteria guided your decision-making?
9. Based on your focused community assessment, what immediate nursing interventions or follow-up assessments would you recommend? How do these align with evidence-based best practices for population health?
10. Reflect on the limitations of a brief drive through or overview of a community like you did on Shadowville. What might you miss by only observing from a vehicle or during a brief walk? How can you ensure your assessment avoids bias and accurately represents the community's perspective?

If you're really short on time, we can suggest the following 3 questions as some of the most important takeaways from this scenario:

1. What environmental health risks and community strengths did you observe, and how might these impact population health?
 - This question encourages students to identify both hazards (proximity to factories, abandoned housing, pesticide spraying, contaminated waterways, poor air quality) and assets (parks, healthcare facilities, gathering places) while connecting observations to health outcomes. It promotes balanced assessment rather than deficit-focused thinking.
2. How do you think your observations would differ between daytime and evening (or different times), and what does this tell you about community life and potential health needs?
 - Timing matters significantly in windshield surveys. Observing when people are at work versus after school hours reveals different dimensions of community rhythm, social interactions, age distribution, and activity patterns. This question helps students recognize that a single observation provides only a snapshot and encourages comprehensive data collection.
3. What additional assessment methods would you use to validate your observations and ensure you're capturing the community's perspective rather than making assumptions?
 - This critical reflection question addresses the limitations of windshield surveys—you can observe the physical environment but may miss important community concerns, cultural factors, and resident priorities. It prompts students to plan next steps like key informant interviews, community forums, or reviewing EPA data to complement visual observations with resident voices and objective data.

30 Minutes or More

If you have 30 minutes or more to debrief with students, we recommend following our debriefing script to support a thoughtful and comprehensive reflection:

Opening

- Thank you for completing the community assessment. This debriefing helps us move from observation to clinical reasoning—connecting what you saw to community health needs. Let's process what you discovered.

Discussion Questions

- Let's start with what you observed.
 - Key question:
 - What physical characteristics stood out—housing quality, street conditions, environmental concerns, or community resources like schools and healthcare facilities?
 - Facilitation tips:
 - Chart responses on a board under categories: Environment, Services, People, Safety
 - Probe: What did you observe through sight, sense, and sound?
 - Ask: What differences do you think you'd notice if you surveyed the community at night vs during the day?
 - Teaching point:
 - The textbook emphasizes surveying twice—during work/school hours and after—because you'll see different dimensions of community life and different populations.
- Now let's balance our assessment.
 - Key question:
 - What community strengths or assets did you identify? What potential health risks or environmental hazards did you observe?
 - Facilitation tips:
 - Encourage asset-based thinking, not just deficit-focused
 - Ask: How might these environmental factors impact population health?
 - Connect observations to social determinants of health
 - Teaching point:
 - Community health nursing partners with communities. Identifying strengths helps us leverage existing resources rather than imposing external solutions.
- Let's discuss the windshield survey.
 - Key question:
 - What are the limitations of a windshield type survey? What might you miss by only observing? What additional data collection methods would help validate your observations and capture the community's perspective?
 - Facilitation tips:
 - Guide students toward: interviews, focus groups, surveys, existing data review
 - Address bias: How do we ensure we're not making assumptions based solely on visual observation?
 - Teaching point:
 - Windshield surveys provide a quick overview and help recognize cues, but comprehensive community assessment requires partnering with residents and key stakeholders from the beginning.

Debrief Focused Exam: Home Health Visit

10 Minutes or Less

If you have 10 minutes or less, choose a few key questions from this list to focus your debrief and highlight the most important takeaways for your students:

- What comprehensive assessment data did you collect about Mr. Hall's health status, functional abilities, and home environment? How did you prioritize which areas to assess first?
- Home health nurses work within the patient and family's territory. How did this shift in perspective affect your approach compared to hospital-based nursing?
- What safety hazards or environmental barriers did you identify in Mr. Hall's home? How do these factors impact his recovery and risk for complications?
- Were you assess the family's support, ability to help with care, and capacity to provide emotional support? What educational needs would you identify for family caregivers?
- What impact will Mr. Hall's physical or cognitive limitations have on daily living activities and family dynamics? How does this influence your care planning?
- What skilled nursing interventions did you provide during the visit? How do these differ from the intermittent, goal-directed nature of home health services versus continuous hospital care?
- Home health care focuses on helping patients and families achieve independence. What specific goals did you establish with Mr. Hall to promote independence and self-management?
- If you were the RN conducting this initial home visit, what key data elements would you document? (Consider sociodemographic information, home environment, support systems, health status, functional status, and health service utilization.)
- What findings would you report immediately to the physician or RN supervisor? What changes in Mr. Hall's condition require escalation versus routine documentation?
- What problems related to lifestyle, safety, environment, family dynamics, or health care practices did you identify? How would you address these in your ongoing care plan to support recovery and stabilization?

If you're really short on time, we can suggest the following 3 questions as some of the most important takeaways from this scenario:

1. Home health nurses work within the patient and family's territory. How did this shift in perspective affect your assessment and interventions compared to hospital-based nursing?
 - This captures the fundamental mindset shift required in home health—students must recognize they're guests in the patient's space, not authority figures in a controlled environment.
2. What safety hazards or barriers to independence did you identify in Mr. Hall's home, and how will you address these in your care plan to support his recovery and self-management?
 - This probes clinical reasoning about environmental assessment, risk identification, and goal-directed interventions—core competencies in home health nursing.
3. How did you assess the family's capacity and willingness to provide care? What educational or support needs did you identify, and why is this assessment as critical as the patient assessment itself?
 - This highlights that home health success depends on family engagement and caregiver capacity—a unique aspect of home-based care that distinguishes it from facility nursing.

30 Minutes or More

If you have 30 minutes or more to debrief with students, we recommend following our debriefing script to support a thoughtful and comprehensive reflection.



Opening

- You've just completed your initial home health visit with Mr. Hall. Home health nursing requires you to shift your perspective—you're working within the patient and family's territory, not a controlled facility environment. Let's reflect on what you learned.
- Let's start with what you observed and collected during your assessment:
 - What was Mr. Hall's health status and functional abilities when you arrived?
 - What did you notice about the home environment—safety hazards, accessibility, resources?
 - How did the family respond? What was their capacity to provide care and emotional support?

Analysis

- Now let's dig deeper into your clinical decision-making:
 - Initial RN home assessments are comprehensive and typically take at least an hour. How did you prioritize which areas to assess first? What guided those decisions?
 - You're a guest in Mr. Hall's home. How did working in his territory change your approach compared to hospital nursing? What environmental or family factors influenced his recovery potential?
 - What skilled nursing care did you provide? Remember, home health is intermittent and goal-directed—the primary goals are self-care and independent functioning. How did your interventions support independence rather than dependence?
 - What findings required immediate reporting to the physician or RN supervisor? What could wait for routine documentation?

Summary

- Let's capture what you'll carry forward into home health practice:
 - How does comprehensive home assessment differ from hospital admission assessment?
 - Why is family assessment as critical as patient assessment in home care?
 - What's one insight about safety, independence, or family dynamics that will change your practice?

Closing

- Home health nursing demands technical proficiency, independence in decision-making, and cultural sensitivity. You must assess not just the patient, but the home environment, family capacity, and barriers to recovery. Excellent work today.

Debrief Focused Exam: HIV Diagnosis with Contact Tracing

10 Minutes or Less

If you have 10 minutes or less, choose a few key questions from this list to focus your debrief and highlight the most important takeaways for your students:

- What verbal and nonverbal cues did you notice when discussing HIV testing with Quan Trần? How did you establish rapport before asking sensitive questions about sexual activity and substance use?
- How did you conduct a patient-centered risk assessment? What specific questions helped Quan take "ownership" of their HIV risk?
- What barriers to testing or disclosure did you identify? How might stigma have influenced Quan's willingness to share information?
- What pretest and posttest counseling elements did you include? Why are both components essential in HIV testing protocols?
- How did you assess Quan's understanding of HIV transmission, prevention strategies, and the importance of early treatment initiation?
- How did you balance Quan's right to confidentiality with your legal obligations for partner notification? What laws govern HIV reporting and contact tracing in your state?
- Who needs to know about Quan's HIV status, and why? How do HIPAA guidelines apply in this situation?
- How did you approach the conversation about notifying sexual partners? What strategies did you use to make this discussion nonjudgmental and supportive?
- What resources or referrals did you provide to Quan for ongoing support, treatment, and partner notification assistance?
- Reflecting on this encounter, what was most challenging about discussing HIV diagnosis and contact tracing? How can you improve your comfort level with these sensitive conversations in future practice?

If you're really short on time, we can suggest the following 3 questions as some of the most important takeaways from this scenario:

1. How did you establish trust and rapport with Quan before discussing sensitive topics like sexual history and substance use? What communication techniques helped reduce stigma
 - Patient-centered communication and therapeutic relationship-building—foundational to disclosure and adherence.
2. Walk me through your approach to partner notification. How did you balance Quan's autonomy with public health responsibility, and what resources did you offer?
 - Clinical reasoning around confidentiality, legal obligations, and ethical decision-making in contact tracing.
3. What gaps in Quan's knowledge about HIV transmission, treatment, or prevention did you identify? How would you address these to support long-term health outcomes?
 - Patient education and empowerment—critical for treatment adherence and reducing transmission risk.

30 Minutes or More

If you have 30 minutes or more to debrief with students, we recommend following our debriefing script to support a thoughtful and comprehensive reflection.

Opening

- Thank you for completing the Shadow Health simulation with Quan Tran. This debriefing helps us reflect on clinical reasoning, communication, and ethical decision-making in HIV care. Remember, there's no judgment here—this is a learning space.
- Let's start by checking in: What emotions came up during this encounter?



Core Discussion

- Therapeutic Communication
 - Let's talk about building trust. How did you establish rapport with Quan before asking sensitive questions about sexual history and substance use?
 - Patients are aware when caregivers aren't comfortable with HIV discussions. Establishing a nonjudgmental, empathetic approach is essential. What specific phrases or techniques helped you create that safe space?
- Ethical & Legal Reasoning
 - Now let's address a challenging aspect: How did you approach partner notification? Walk me through how you balanced Quan's confidentiality with your public health responsibility.
 - Confidentiality must be protected carefully and shared only with caregivers who need to know. However, partner notification laws require reporting. What resources could you offer Quan to support this process while respecting autonomy?
- Patient Education
 - Finally, let's focus on empowerment: What gaps in Quan's knowledge about HIV transmission, treatment, or prevention did you identify? How would you address these?
 - A newly diagnosed patient may not retain or understand information initially. Be prepared to repeat and clarify over several months. What's one key teaching priority for Quan's first visit?

Closing

- Reflection question: What was most challenging about this encounter, and what will you do differently in future HIV care situations?
- Every nurse is potentially an HIV nurse. Your ability to discuss sexual activity and substance use in nonjudgmental ways, maintain confidentiality while fulfilling legal obligations, and provide patient-centered education will directly impact health outcomes and reduce transmission.
- Recommended action step: Before next class, review current CDC guidelines on HIV testing and your state's partner notification laws.

Debrief Focused Exam: Comprehensive Assessment with Barriers to Care

10 Minutes or Less

If you have 10 minutes or less, choose a few key questions from this list to focus your debrief and highlight the most important takeaways for your students:

- What social determinants of health did you identify affecting Tanner's ability to access care? How do these factors interconnect to create barriers?
- How did you assess Tanner's economic stability, housing situation, transportation access, and insurance status? Which barrier seemed most urgent to address first?
- What strengths and resources did you identify in Tanner's life? How can you build on these assets when planning interventions?
- How do the barriers Tanner faces reflect broader health disparities in medically underserved populations? What systemic factors contribute to these inequities?
- What assumptions or biases might healthcare providers hold about patients facing similar barriers? How did you ensure your approach remained nonjudgmental and patient-centered?
- What community resources or referrals did you identify to help Tanner overcome barriers to care? How did you prioritize which resources to discuss first?
- How would you follow up to ensure Tanner successfully connected with resources? What obstacles might prevent follow-through, and how could you address them?
- As a community health nurse, what role can you play in advocating for patients like Tanner at the policy level? What data would you collect to support policy changes?
- How might you collaborate with other healthcare professionals, social services, or community organizations to address the multiple barriers Tanner faces?
- Reflecting on this encounter, what was most challenging about addressing barriers to care? How has this experience shaped your understanding of the nurse's role in promoting health equity?

If you're really short on time, we can suggest the following 3 questions as some of the most important takeaways from this scenario:

1. What social determinants of health created barriers for Tanner, and how do these factors interconnect to affect health outcomes?
 - Understanding the multifactorial nature of health disparities—poverty, environmental threats, inadequate access to healthcare, and educational inequalities all contribute to preventable differences in achieving optimal health.
2. What community resources and referrals did you identify to address Tanner's barriers? How did you prioritize which interventions would have the greatest impact?
 - Community-based nursing practice and resource navigation—nurses improve health by addressing social determinants and providing equitable, accessible care across the continuum.
3. How does Tanner's situation reflect broader health equity issues? What is your role as a nurse in advocating for populations facing systematic obstacles to health?
 - Health equity and social justice—nurses have a moral obligation to advocate for policy changes that improve social, economic, and environmental factors affecting vulnerable populations.

30 Minutes or More

If you have 30 minutes or more to debrief with students, we recommend following our debriefing script to support a thoughtful and comprehensive reflection.



Opening

- Thank you for completing the Shadow Health community assessment with Tanner Bailey. This debriefing focuses on social determinants of health, health disparities, and your role in promoting health equity.
- Let's begin: What surprised you most about the barriers Tanner faces?

Core Discussion

- Social Determinants of Health
 - What social determinants of health created barriers for Tanner, and how do these factors interconnect?
 - About 75% of health status is influenced by social determinants like income, education, employment, housing, and food security. Medically underserved populations often have multiple risk factors with cumulative effects. What specific stressors did you identify in Tanner's life, and how do they compound each other?
- Community Resources & Interventions
 - What community resources or referrals did you identify to address Tanner's barriers? How did you prioritize interventions?
 - Complete assessment of a population's needs enables you to design interventions within the patient's community context. Consider 'wrap-around services', comprehensive health services with social and economic support wrapped around them. What would a one-stop service approach look like for Tanner?
- Health Equity & Advocacy
 - How does Tanner's situation reflect broader health equity issues? What's your role as a nurse in advocating for populations facing systematic obstacles?
 - Health disparities are preventable differences in achieving optimal health. They stem from social, political, economic, or environmental obstacles - poverty, inadequate access to care, educational inequalities. Vulnerable populations experience discrimination and may not have basic human needs met. How can you advocate at both the individual and policy level

Closing

- What was most challenging about addressing barriers to care? How has this shaped your understanding of community health nursing?
- Community health nurses must assess both stressors AND strengths. Learning patients' resources for coping is essential for designing effective, culturally appropriate interventions that advance health equity.
- Recommended action step: Identify three community resources in your area that address social determinants of health. Be prepared to discuss next class.

Debrief Community Care Plan: Environmental Exposure

10 Minutes or Less

If you have 10 minutes or less, choose a few key questions from this list to focus your debrief and highlight the most important takeaways for your students:

- What environmental exposures did you identify in this case, and how did you categorize them (air, water, soil, food; physical, chemical, biological, ergonomic, or psychological)?
- How did you prioritize which environmental health concerns to address first? What factors influenced your decision-making?
- What assessment questions were most effective in uncovering environmental exposures across this community setting?
- Did social determinants of health and environmental justice issues influence this patient's environmental exposures? Consider socioeconomic factors, structural vulnerabilities, and health inequities.
- What ethical considerations arose when balancing competing priorities (e.g., economic concerns versus environmental protection) in this case?
- What specific interventions did you recommend to reduce the patient's environmental exposure? How did you empower the patient to avoid further contamination?
- What referral resources would be appropriate for this patient? Consider environmental epidemiology units, toxicology services, or local/provincial health departments.
- How could you facilitate community involvement to address the broader environmental health issues identified in this case? What role would you take—providing solutions or supporting community-led problem-solving?
- What additional knowledge or resources do you need to more effectively address environmental health concerns in your nursing practice? How might you integrate environmental health into your routine assessments?
- Reflecting on this case, how will you incorporate environmental exposure assessment into your future patient histories? What specific questions will you routinely ask?

If you're really short on time, we can suggest the following 3 questions as some of the most important takeaways from this scenario:

1. What environmental exposures did you identify, and how did you prioritize which concerns to address first?
 - This question targets clinical reasoning and assessment skills. It helps students articulate their systematic approach to identifying hazards (air, water, chemical, biological) and demonstrates their ability to make evidence-based decisions about intervention priorities.
2. How did social determinants of health and environmental justice issues influence this patient's environmental exposures?
 - This question connects environmental health to health equity. Environmental justice addresses how socioeconomic marginalization and structural vulnerabilities affect adequate nutrition, shelter, sanitation, and safe working conditions. Students should recognize that environmental hazards disproportionately impact racialized and structurally vulnerable populations, making this a critical lens for community health nursing practice.
3. How could you facilitate community involvement to address the broader environmental health issues identified in this case?
 - This question shifts focus from individual to community-level intervention. It challenges students to consider their role in policy development and community partnership. Rather than simply presenting solutions, nurses should support community members in identifying and solving environmental problems themselves—providing expertise, information, and leadership while respecting community-led problem-solving. This

aligns with the community-as-partner approach and helps students understand their advocacy role in environmental health policy development.

30 Minutes or More

If you have 30 minutes or more to debrief with students, we recommend following our debriefing script to support a thoughtful and comprehensive reflection.

Opening

- Thank you for completing the Shadow Health environmental exposure case. Let's reflect on your clinical reasoning and community health nursing approach. This is a safe space to discuss what went well and what you'd approach differently.

Core Discussion

- Assessment & Clinical Reasoning
 - Key question:
 - What environmental exposures did you identify, and how did you prioritize which concerns to address first?
 - Listen for:
 - Systematic identification of exposures (air, water, chemical, biological)
 - Evidence-based prioritization
 - Use of environmental health history
 - Teaching point:
 - Environmental health histories should be obtained for both adults and children.
 - Effective assessment explores home, workplace, school, and community settings to uncover the full scope of exposures.
- Environmental Justice
 - Key question:
 - How did social determinants of health and environmental justice issues influence this patient's environmental exposures?
 - Listen for:
 - Recognition of health inequities
 - Understanding of structural vulnerabilities
 - Awareness that vulnerable groups experience disproportionate exposure
 - Teaching point:
 - Environmental justice addresses how socioeconomic marginalization affects adequate nutrition, shelter, sanitation, and safe working conditions.
 - Racialized and structurally vulnerable populations are disproportionately impacted by environmental hazards. Nurses can influence decision-making about urban design and the built environment for these groups.
- Community-Level Intervention
 - Key question:
 - How could you facilitate community involvement to address the broader environmental health issues identified?
 - Listen for:
 - Shift from individual to community focus
 - Partnership versus directive approach
 - Recognition of advocacy role
 - Teaching point:
 - Rather than impose solutions, nurses should dialogue with community members about what they perceive as problematic. The nurse's role changes from directing lifestyle changes to providing support, information, and expertise to assist in meeting group goals.

- Forming coalitions, connecting with larger organizations, and helping communities identify health-damaging problems are essential nursing tasks.

Closing

- Environmental health is clearly intertwined with social, political, and economic policies. As community health nurses, you have the opportunity to advocate for vulnerable populations and work toward health equity through the decisions you make and interventions you undertake.
- Final reflection: What will you do differently in your next environmental health assessment?