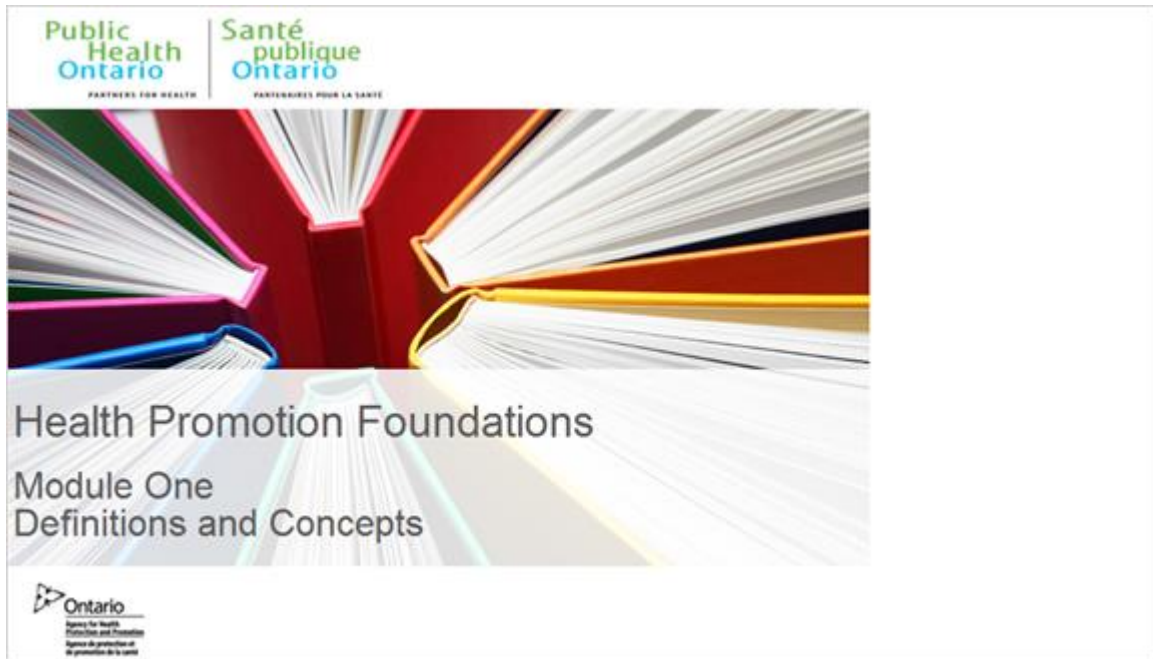


# Health Promotion Foundations - Module One

## 1. HP101 Module One Definitions and Concepts

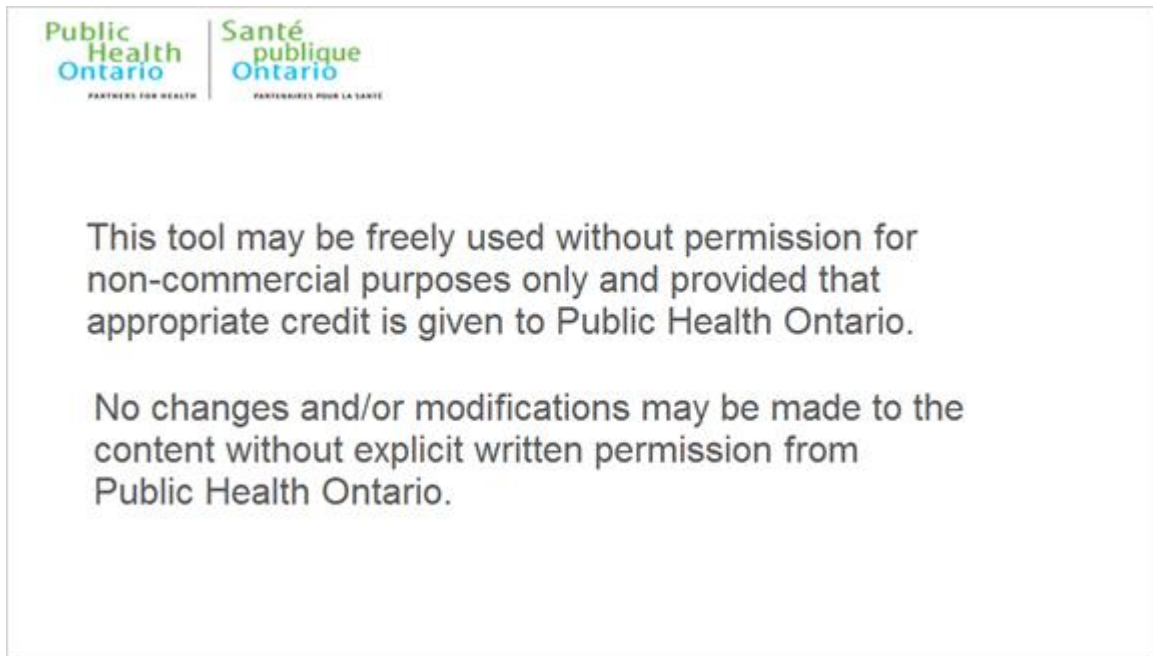
### 1.1 HP101 Module One Definitions and Concepts



#### Notes:

In this module, we will introduce key health promotion definitions and concepts. We will also outline some of the topics that are examined in more depth, later in this course. This module will take about thirty minutes to complete.

## 1.2 Terms of Use






### Notes:

This tool may be freely used without permission for non-commercial purposes only and provided that appropriate credit is given to Public Health Ontario.

### 1.3 Navigation Menu

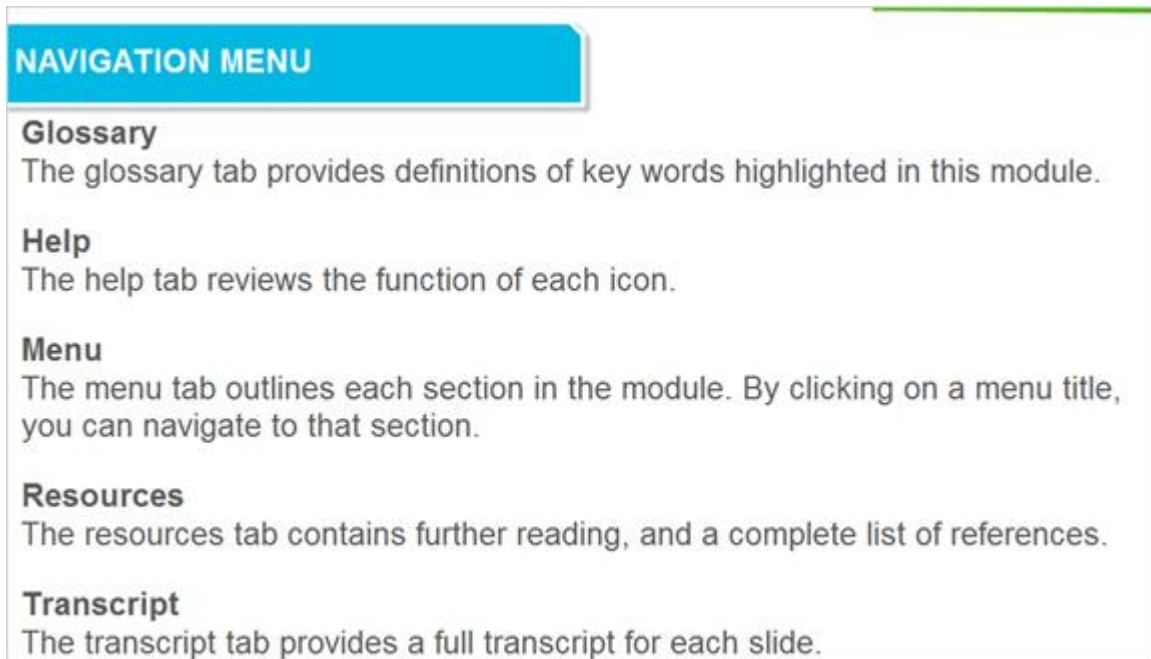
#### NAVIGATION MENU

-  Resource icon: click this icon for further reading
-  Compare answers button: click this button to see our response to the exercise
-  Close button: clicking on the 'X' button will close any window

**Notes:**

Throughout this module, you will see these icons. To be reminded of what they mean, please refer to the help tab at any point during the module.

## 1.4 Navigation Menu



**NAVIGATION MENU**

**Glossary**  
The glossary tab provides definitions of key words highlighted in this module.

**Help**  
The help tab reviews the function of each icon.

**Menu**  
The menu tab outlines each section in the module. By clicking on a menu title, you can navigate to that section.

**Resources**  
The resources tab contains further reading, and a complete list of references.

**Transcript**  
The transcript tab provides a full transcript for each slide.

### Notes:

In the upper right hand corner of the slide, you will see a selection of 'tabs'.

The glossary tab contains definitions of key words used in this module.

The help tab reviews the function of each icon.

The menu tab provides a list of all the sections in the module and allows you navigate to any one of them.

The resources tab contains further reading options, and a complete list of references for this module.

The transcript tab contains a full transcript of each slide.

## 1.5 Learning Objectives



**LEARNING OBJECTIVES**

1. Define health promotion according to the Ottawa Charter for Health Promotion.
2. Describe the features and values that shape practice.
3. Distinguish health promotion from related concepts such as disease prevention, population health and harm reduction.

### Notes:

By the end of this module, you will be able to:

Define health promotion according to the Ottawa Charter for Health Promotion.

Describe the key features and values that shape practice.

Distinguish health promotion from related concepts such as disease prevention, population health and harm reduction.

## 2. Health Promotion Values

### *2.1 Health Promotion Values*



**Notes:**

In this module, there are five sections. We will begin by discussing health promotion values.

## 2.2 Stop and Think

### STOP AND THINK

1. What are the key definitions that guide your health promotion work?

type your text here

2. Which of the learning objectives do you think might be most important in your own work?

type your text here

#### Notes:

Before you start working through this module, consider the following questions:

What are the key definitions that guide your health promotion work?

Which of the learning objectives do you think might be most important in your own work?

## 2.3 Ottawa Charter



“The process of enabling people to increase control over, and to improve, their health.”<sup>1</sup>

### Notes:

Over the past thirty years, the field of health promotion has developed as a way of acting on the root causes of health and wellness. While many definitions of health promotion exist, the Ottawa Charter for Health Promotion emerged in 1986 as the predominant Canadian framework.

The Ottawa Charter defines health promotion as:

‘the process of enabling people to increase control over, and to improve, their health’ (1).

## 2.4 Values



### Notes:

To better understand this definition, it helps to appreciate the key values that guide how health promoters work with individuals, groups and communities to address health issues.


## 2.5 Empowerment



### Notes:

The first of four values is empowerment, defined in the World Health Organization Health Promotion Glossary as a 'process through which people gain greater control over the decisions and actions affecting their health.'<sup>(3)</sup>

## 2.6 Empowerment



EMPOWERMENT

Three conditions that contribute to empowerment:<sup>4</sup>

1. Social networks
2. Community participation
3. Community competence

### Notes:

Nina Wallerstein, in her paper called Empowerment and Health: Theory and Practice of Community Change, identifies three conditions that contribute to empowerment.

They are: social networks, community participation and community competence (4).

## 2.7 Positive Health Impacts of Empowerment



### Notes:

There are a number of research examples that show positive health impacts in community interventions that promote these conditions. These positive impacts include: increased levels of social support; enhanced coping capacities; increased life satisfaction; and, decreased susceptibility to illness (5).

## 2.8 Social Justice and Equity




### Notes:

The second health promotion value is social justice and equity. In health promotion we emphasize the role of equitable access to food, income, employment, shelter and education in achieving good health.

In fact, there is a large body of research showing that poverty and income inequality are the greatest determinants of health status (6).

## 2.9 Social Justice and Equity

**SOCIAL JUSTICE AND EQUITY**




Lower-income Canadians are more likely to die younger and suffer more illness than Canadians with higher income regardless of age, sex, race or place of residence.<sup>6,7</sup>

### Notes:

As income determines living conditions such as safe housing, affordability of nutritious food, and greater control over stressful life circumstances, lower-income Canadians are more likely to die younger and suffer more illness than Canadians with higher income regardless of age, sex, race or place of residence. (6, 7)


## 2.10 Inclusion



**INCLUSION**

People can be excluded due to:

- Poverty
- Ill health
- Gender
- Race
- Disability or lack of education



### Notes:

Our third health promotion value is inclusion.

Inclusion is a term familiar to most of us. At some point, we have all felt included or excluded from our social networks or communities.

People who are excluded do not have the opportunity to reap the health, social and economic benefits of full participation in society.

## Resources (Slide Layer)

**INCLUSION**

Resources:

- [Count me in! Workbook: Tools for an Inclusive Ontario](#)
- [Count me in! Final Report. Inclusion: Societies that Foster Belonging Improve Health](#)
- [Health Equity Impact Assessment \(HEIA\) Workbook](#)

### 2.11 Inclusion

**INCLUSION**



In health promotion, we work with members of marginalized groups in the community who face systemic barriers to good health.

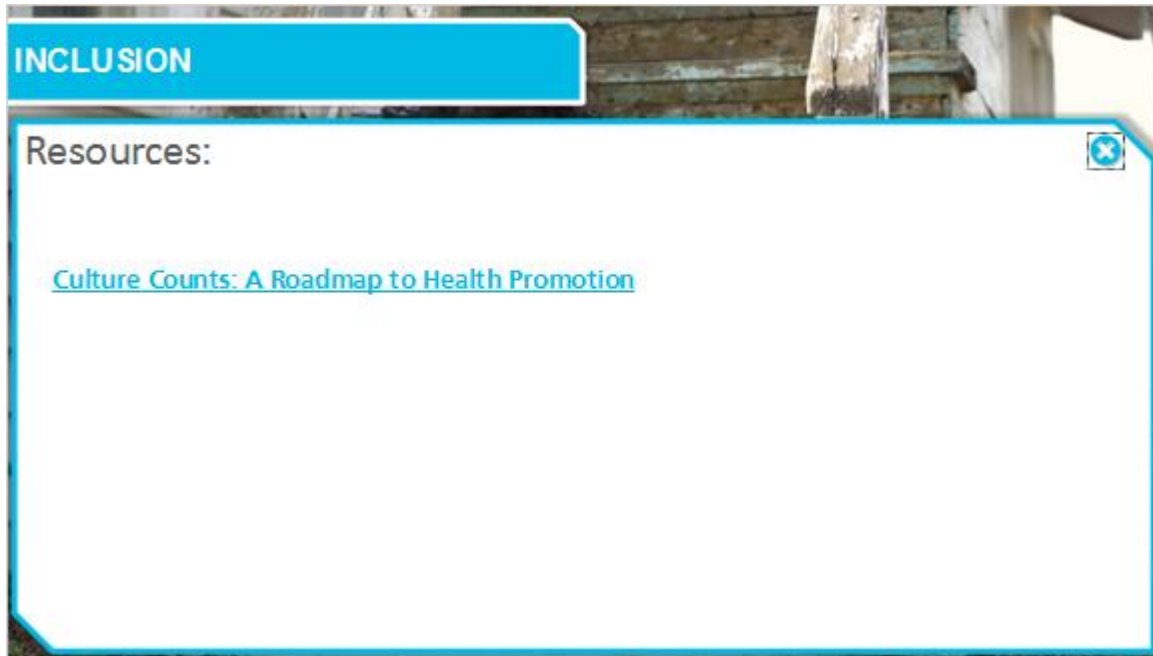


#### Notes:

To ensure that everyone has a voice in the decisions affecting their health, we

work with members of marginalized groups who face systemic barriers to good health.

### Resources (Slide Layer)



The slide features a blue header with the word "INCLUSION" in white. Below the header is a white rectangular area with a blue border. Inside this area, the word "Resources:" is written in blue. Below it is a blue underlined link that reads "Culture Counts: A Roadmap to Health Promotion". In the top right corner of the white area, there is a small blue square icon containing a white 'X'.

## 2.12 Respect



### Notes:

Our fourth and final health promotion value is respect.

Respecting a diverse range of viewpoints, cultures and perspectives is an important prerequisite for building sustainable relationships, the basis for action to achieve shared goals.

## 2.13 Quiz Question

*(Drag and Drop, 10 points, 1 attempt permitted)*

## QUIZ QUESTION

Match the health promotion values to the examples.

A community organization invites community members to voice their opinions about the lack of access to healthy foods in their neighbourhood.

A local health centre adapts its services to meet the language and cultural needs of the growing South Asian population in the community.

A health clinic promotes acceptance of different perspectives, viewpoints and lifestyles.

A public health team accounts for the 12 determinants of health in planning the delivery of accessible health service.

RESPECT

SOCIAL JUSTICE  
AND EQUITY

INCLUSION

EMPOWERMENT

Drag Item	Drop Target
INCLUSION	inclusion box
SOCIAL JUSTICE AND EQUITY	social justice and equity box
RESPECT	respect box
EMPOWERMENT	empowerment box

Drag and drop properties

Snap dropped items to drop target (Stack random)

Delay item drop states until interaction is submitted

**Feedback when correct:**

That's right! You selected the correct response.

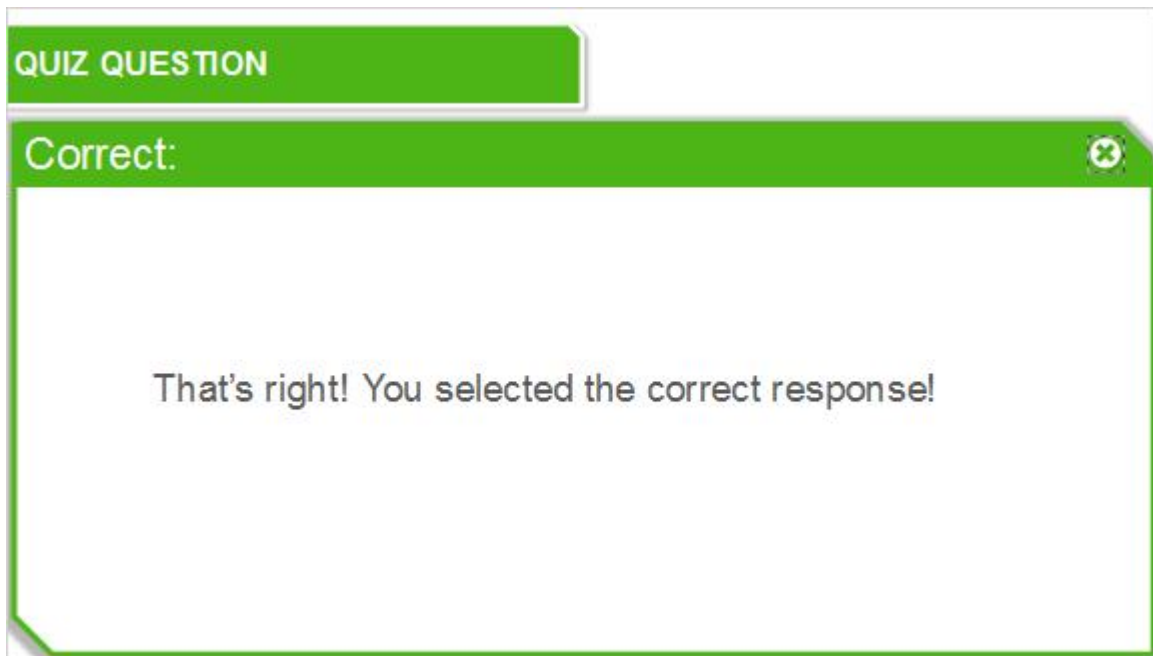
**Feedback when incorrect:**

You did not select the correct response.

**Notes:**

Now, take a moment to think back and reflect on some of the concepts you have learned. Match each health promotion value to the health promotion example.


**Correct (Slide Layer)**



The image shows a slide layer with a green header and a white content area. The header contains the text "QUIZ QUESTION" in white. Below the header, the word "Correct:" is written in green. In the top right corner of the content area, there is a small green icon of a crossed-out 'X'. The main text in the center of the slide reads "That's right! You selected the correct response!".

## Incorrect (Slide Layer)

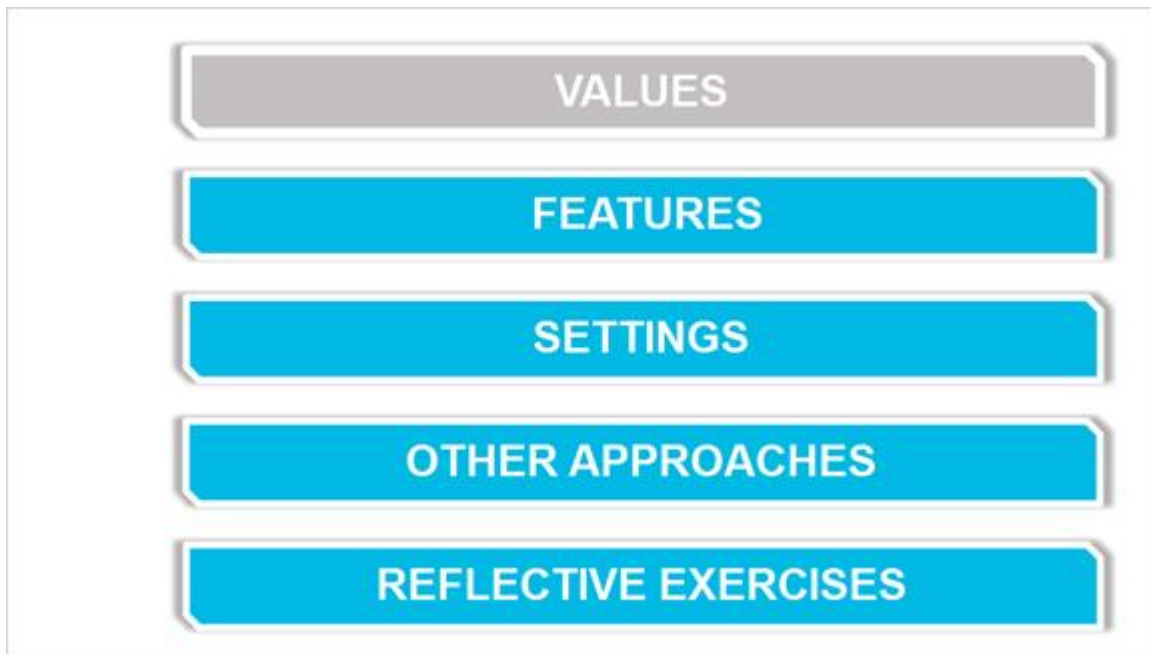
**QUIZ QUESTION**

**Incorrect: please find the correct answer below** 

<b>EMPOWERMENT</b>	A community organization invites community members to voice their opinions about the lack of access to healthy foods in their neighbourhood
<b>SOCIAL JUSTICE AND EQUITY</b>	A local health centre adapts its services to meet the language and cultural needs of the growing South Asian population in the community
<b>INCLUSION</b>	A health clinic promotes acceptance of different perspectives, viewpoints and lifestyles
<b>RESPECT</b>	A public health team accounts for the 12 determinants of health in planning the delivery of accessible health service

## 3. Health Promotion Features

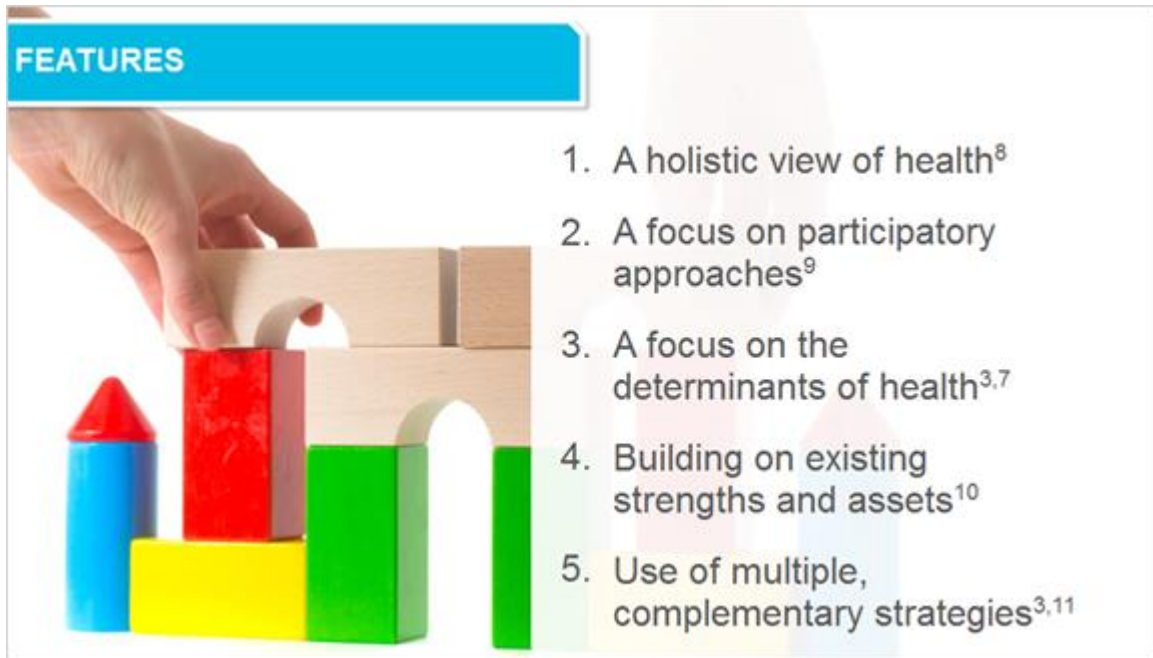
### 3.1 Health Promotion Features



**Notes:**

In the next section, we will cover the core features of health promotion.

**3.2 Features**



The image shows a hand placing a wooden block on a structure of colorful blocks (red, yellow, green, blue). A blue banner at the top left contains the word "FEATURES". To the right of the blocks is a list of five features of health promotion.

1. A holistic view of health<sup>8</sup>
2. A focus on participatory approaches<sup>9</sup>
3. A focus on the determinants of health<sup>3,7</sup>
4. Building on existing strengths and assets<sup>10</sup>
5. Use of multiple, complementary strategies<sup>3,11</sup>

**Notes:**

Operationally, health promotion has a number of unique features that distinguish it from other approaches such as disease prevention.

### 3.3 Holistic View of Health



**Notes:**

The first of five defining features of health promotion is a holistic view of health that considers not just physical health, or the absence of disease, but also mental and social well-being. The World Health Organization definition of health incorporates these concepts. (8)

### 3.4 Holistic View of Health

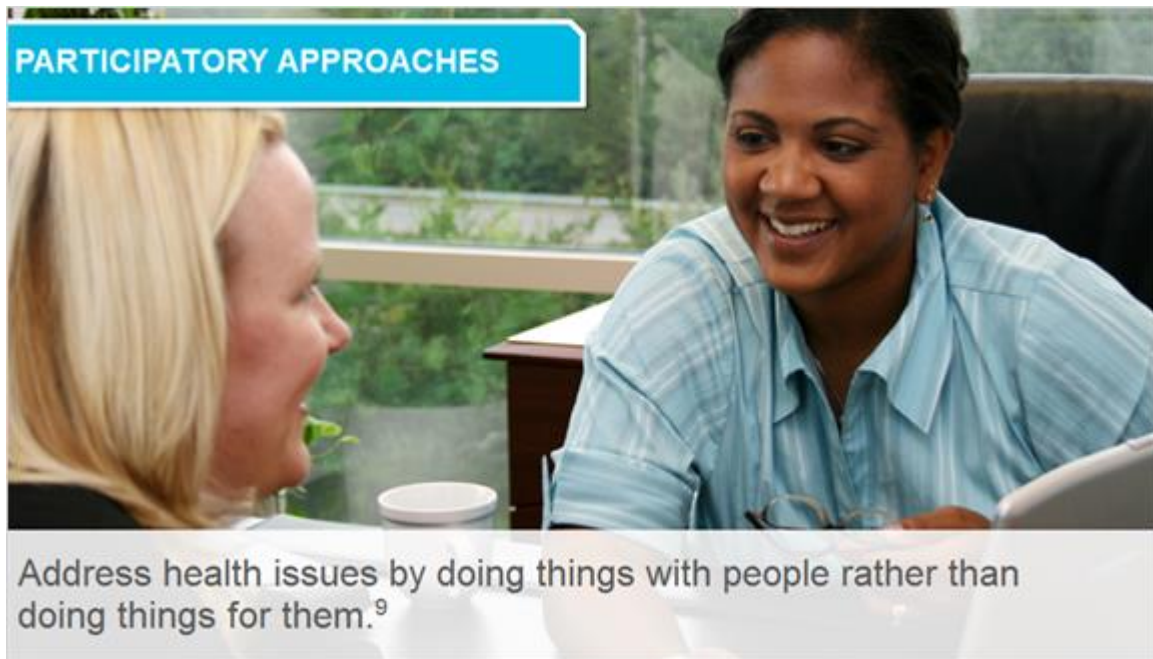


**Notes:**

Practically speaking, this means that physical health is not the only end goal of health promotion efforts.

Rather it is considered just *one* resource contributing to health, along with other social and personal resources. (8)

### 3.5 Participatory Approaches




**Notes:**

The second defining feature of health promotion is that it emphasizes participatory approaches. This means that whenever possible, health promotion practitioners address health issues by doing things with people, rather than for them. (9)

### 3.6 Participatory Approaches

**PARTICIPATORY APPROACHES**

Enable people to take greater control over the conditions affecting their health.<sup>9</sup>



**Notes:**

The focus on supporting people to take greater control over the conditions that affect their health is perhaps THE most important feature of health promotion. It embodies the values introduced earlier in this module - empowerment, social justice and equity, inclusion and respect. (9)

### 3.7 Determinants of Health



**Notes:**

Continuing with the theme of health being broader than a physical concept, the third feature is that many determinants of health are considered when selecting health promotion strategies. Determinants of health are the range of social, economic and environmental factors that affect health status (3).

### 3.8 Determinants of Health



**Notes:**

The Public Health Agency of Canada identifies the following twelve key determinants of health. (7)

Can you think of any other determinants of health?

### 3.9 Strengths and Assets



**Notes:**

The fourth feature of health promotion is that whenever possible, health promotion practice builds on positive factors promoting the health of individuals and communities.

Strengths or assets may include strong community leaders, existing programs and services, strong social support networks, or institutions and events that bring people together (10).

### 3.10 Multiple, Complementary Strategies



MULTIPLE, COMPLEMENTARY STRATEGIES

Levels of intervention vary:

- Individuals
- Networks (families, social groups/communities)
- Organizations
- Entire populations/society

**Notes:**

The fifth and final feature of health promotion is that it applies multiple, complementary strategies.

Another way of saying this is that health promotion uses a *comprehensive* approach.

This means many things. For example, interventions may be comprehensive because they address different levels of audiences including individuals, networks, organizations or society as a whole.

### 3.11 Multiple, Complementary Strategies

**MULTIPLE, COMPLEMENTARY STRATEGIES**



Ottawa Charter action areas:

1. Build healthy public policy
2. Create supportive environments
3. Strengthen community action
4. Develop personal skills
5. Re-orient health services<sup>1</sup>

**Notes:**

A truly comprehensive health promotion intervention builds healthy public policy, creates supportive environments, strengthens community action, develops personal skills and re-orient health services.(1) These are the five action areas needed to influence health, as recognized by the Ottawa Charter.

### 3.12 Multiple, Complementary Strategies



**MULTIPLE, COMPLEMENTARY STRATEGIES**

- Health communication
- Health education
- Self-help/mutual aid
- Organizational change
- Community development and mobilization
- Advocacy
- Policy development
- Intersectoral collaboration

#### Notes:

There are a variety of health promotion techniques or strategies that can help address the Ottawa Charter action areas. Examples include health communication, self-help, community development, and policy change.

Research indicates that health promotion programs using multiple strategies are more effective than those with a single strategy approach (12).

### 3.13 Quiz Question

*(Pick One, 10 points, 1 attempt permitted)*

## QUIZ QUESTION

Which of the following is NOT an action area of the Ottawa Charter for Health Promotion?

- A. Create supportive environments.
- B. Strengthen community action.
- C. Re-orient health services.
- D. Conduct needs assessments.
- E. Develop personal skills.
- F. Build healthy public policy.

Correct	Choice
	A. Create supportive environments.
	B. Strengthen community action.
	C. Re-orient health services.
X	D. Conduct needs assessments.
	E. Develop personal skills.
	F. Build healthy public policy.

### Feedback when correct:

That's right! You selected the correct response.


### Notes:

Now, take a moment to reflect on what you've just learned. Can you identify which of the options presented is not an action area of the Ottawa Charter for

Health Promotion?

**Correct (Slide Layer)**


**QUIZ QUESTION**

**Correct:** 

That's right! You selected the correct response!

**Incorrect (Slide Layer)**

**QUIZ QUESTION**

**Incorrect: please find the correct answer below** 

Which of the following is not an action area of the Ottawa Charter for Health Promotion?

The correct response is:

**D.** Conduct needs assessments

### 3.14 Comprehensive Approach



#### Notes:

Health promotion is also multi-disciplinary. Truly comprehensive health promotion incorporates elements from many fields such as psychology, sociology, nursing, social work, community organizing and education.

### 3.15 Quiz Question

*(Pick One, 10 points, 1 attempt permitted)*

## QUIZ QUESTION

Key features of health promotion include:

- A. A holistic view of health.
- B. A focus on participatory approaches.
- C. A focus on the determinants of health.
- D. Building on existing strengths and assets in individuals, networks, organizations and communities.
- E. Using multiple, complementary strategies to promote health at the individual and community level.
- F. All of the above.

Correct	Choice
	A. A holistic view of health.
	B. A focus on participatory approaches.
	C. A focus on the determinants of health.
	D. Building on existing strengths and assets in individuals, networks, organizations and communities.
	E. Using multiple, complementary strategies to promote health at the individual and community level.
X	F. All of the above.

### Feedback when correct:


That's right! You selected the correct response.

**Notes:**

Now, please take a moment to reflect on what you've learned. Can you identify which of the following are key features of health promotion?

**Incorrect (Slide Layer)**

QUIZ QUESTION

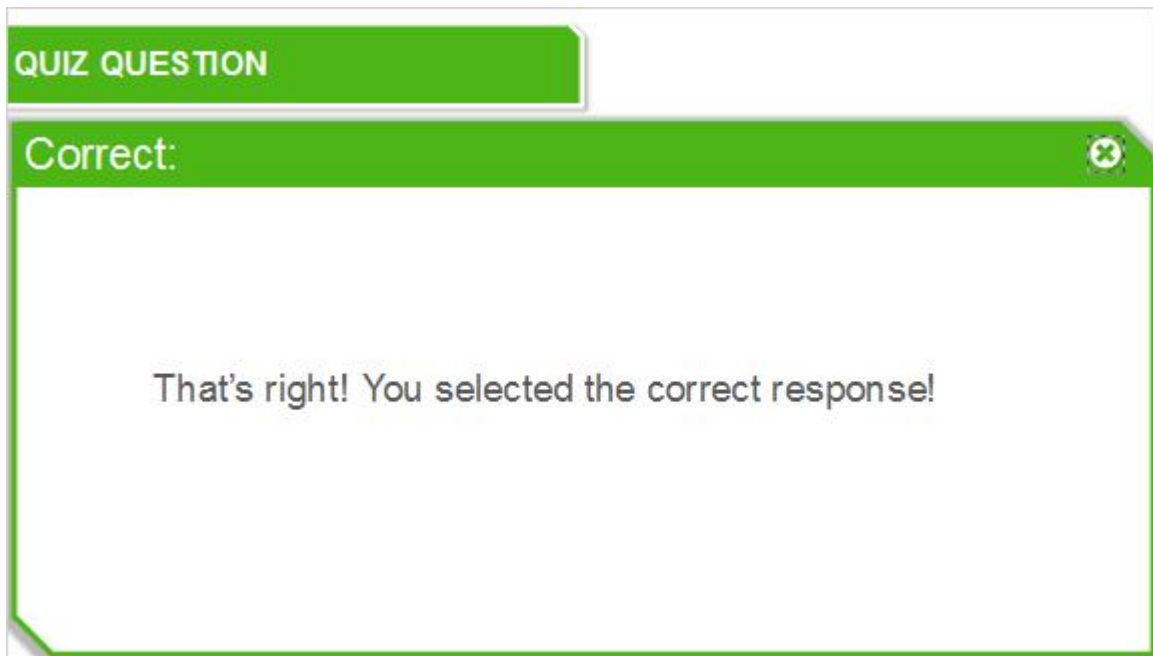
Incorrect: please find the correct answer below 

Key features of health promotion include:

The correct response is:

**F.** All of the above

## Correct (Slide Layer)



QUIZ QUESTION

Correct: ✕

That's right! You selected the correct response!

The image shows a slide titled 'QUIZ QUESTION' with a green header. Below the header, the word 'Correct:' is displayed in a green bar, followed by a close button icon (✕). The main content area of the slide contains the text 'That's right! You selected the correct response!'.

## 4. Health Promotion Settings

### 4.1 Health Promotion Settings



VALUES

FEATURES

SETTINGS

OTHER APPROACHES

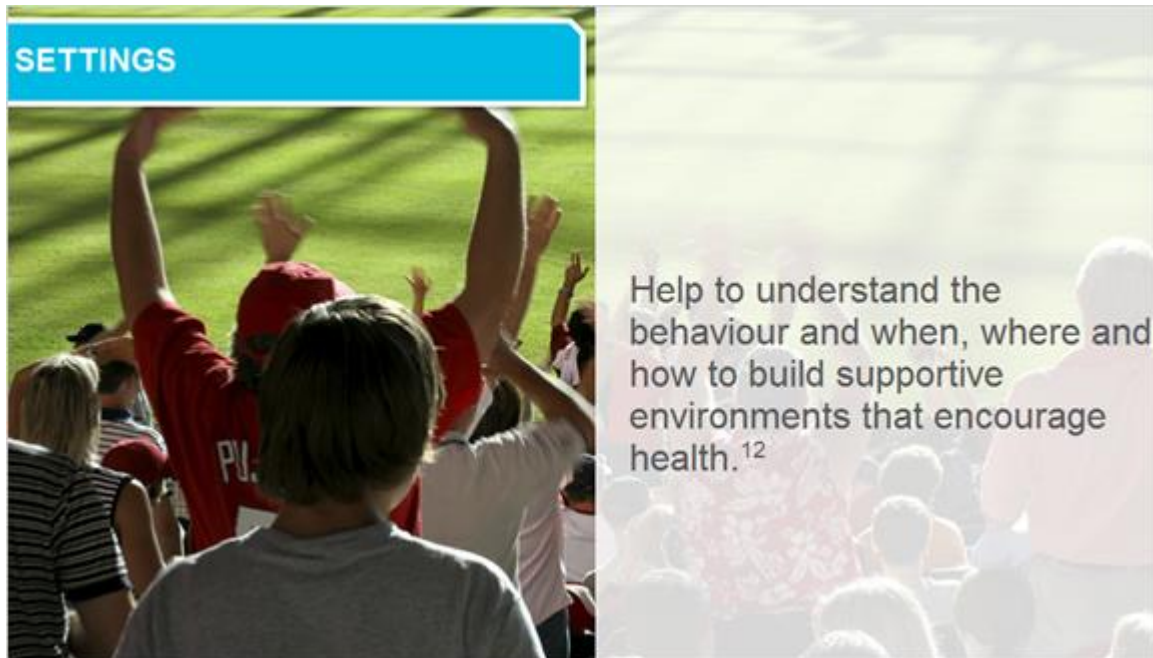
REFLECTIVE EXERCISES

The image displays a vertical menu with five options: 'VALUES', 'FEATURES', 'SETTINGS', 'OTHER APPROACHES', and 'REFLECTIVE EXERCISES'. The 'VALUES' and 'FEATURES' options are in grey buttons, while 'SETTINGS', 'OTHER APPROACHES', and 'REFLECTIVE EXERCISES' are in blue buttons.

**Notes:**

In the next section, we will cover the settings in which health promotion takes place.

## **4.2 Settings**



**Notes:**

Thinking about the settings in which people live, love, work, learn and play helps us to understand health behaviour and decide on appropriate health promotion interventions (1, 13).

Specifically, a settings approach helps us figure out how to provide supportive environments, a key part of health promotion. (12)

## 4.3 Settings

**SETTINGS**



- Home and family
- School
- Workplace
- Health care setting
- Community

**Notes:**

Some of the most commonly discussed settings in health promotion include the home and family, school, workplace, health care settings and the community as a whole. We will now discuss each of these in turn.

## 4.4 Home and Family



HOME AND FAMILY

A dynamic influence, shaping our:<sup>14</sup>

- Attitudes
- Practices
- Behaviours
- Coping mechanisms
- Health behaviour

### Notes:

The family is a dynamic unit that determines health beliefs, attitudes, practices, and how we cope with stress and illness. The home and family setting is generally the primary influence shaping who we are as individuals, including our attitudes and beliefs towards health. As such, it plays a large determining role in health behaviour. (14)

## 4.5 Home and Family



### Notes:

The home and family setting is influenced by internal factors such as the cultural norms, values and traditions of the people within it. It is also influenced by external factors such as employment status and neighbourhood safety. As such, it is constantly changing and adapting (14).

## 4.6 Home and Family



HOME AND FAMILY

- Source of information
- Protector or enabler
- Considerable impact on health
- Primary target for health promotion interventions<sup>14</sup>

### Notes:

The home and family setting is an important source of information. It has the capacity to act as a protector or enabler. Because of this, the home and family setting can have a considerable impact on health, and is a primary target for many health promotion interventions (14).

## 4.7 School

**SCHOOL**




- Children and youth spend their most formative, impressionable years in this setting.
- Peer relationships that affect attitudes and behaviours are formed here.
- Potential for both profound positive or negative effects.<sup>12,15</sup>

### Notes:

The school setting is another important influence on health. There are many reasons for this. Children and youth spend a large amount of time in school. Also, the most formative and impressionable years are spent in school settings, where peer relationships that have profound influences on attitudes and behaviours are formed. These relationships have the potential to build confidence and self-esteem. However, the school setting can also have the opposite effect, when youth are subjected to bullying, ostracism or peer pressure to conform (12, 15).

## 4.8 School



**SCHOOL**

Formal and informal learning about:<sup>12,15</sup>

- Nutrition
- Physical activity
- Sexual health and behaviour
- Substance use

Programs in this setting have the potential for enormous impact.

### Notes:

Both formal and informal learning takes place in the school setting, regarding nutrition, physical activity, sexual health and behaviour, and substance use. For this reason, the school is an extremely important forum for health promotion. Programs in this setting have the potential for enormous impact (12, 15).

## 4.9 Workplace



### Notes:

The workplace is also an important setting for health promotion. In the developed world, technological innovations, globalization, mechanization of manual labour and increased controls on environmental workplace hazards, have changed the nature of workplace health promotion. (16) While physical factors such as air quality, hazardous exposures and injuries are still a concern, the focus is increasingly moving to social aspects of health and mental health. (16)

## 4.10 Workplace



WORKPLACE

- Identify root causes of ill health.
- Develop equitable, safe, supportive environments.
- Support good organizational management through policy development.<sup>16</sup>

### Notes:

Efforts to improve health in the workplace start by identifying the root causes affecting physical and mental health. They also include the development of equitable, safe and supportive working environments (16).

As these things are largely influenced by organizational management, policy development tends to be a strong focus of workplace health initiatives.

## 4.11 Health Care




### Notes:

Health care settings are also important in health promotion. In Poland, Green and Rootman's book, *Settings for Health Promotion: Linking Theory and Practice*, Joy L Johnson describes health care institutions as 'large, established organizations primarily directed toward the provision of medical care, including acute care, long-term care, rehabilitation, and psychiatric care' (17).

In addition to the traditional role of providing medical care, health care settings now play a multi-dimensional role in health promotion (17).

## 4.12 Health Care



HEALTH CARE

Technological advances, increasing chronic disease rates and budget pressures have spawned an interest in helping patients to better manage their own health, and ultimately become less reliant on health care institutions.<sup>17</sup>

### Notes:

Technological advances, increasing chronic disease rates and budget pressures have spawned an interest in helping patients to better manage their own health, and ultimately become less reliant on health care institutions.

Health care settings may also become involved with health promoting initiatives such as greening of hospital procedures, community engagement, patient counseling, clinical rehabilitation, and corporate and community wellness programs. (17)

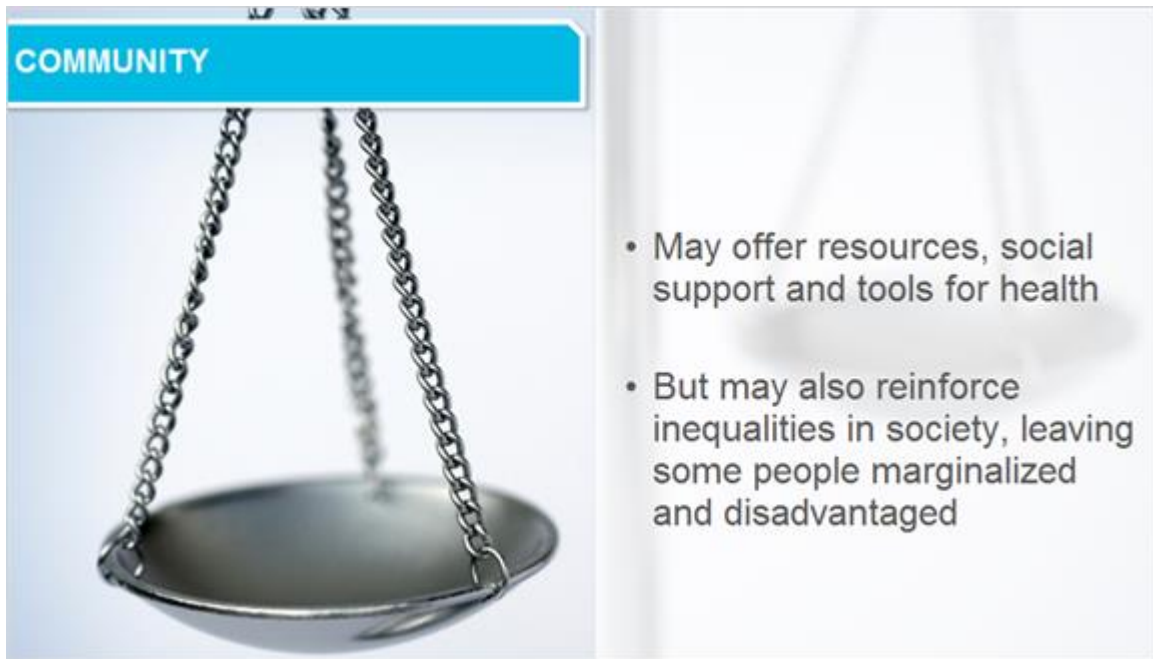
### 4.13 Community



**Notes:**

The community is also an important setting in health promotion. In the book, *Theory in a Nutshell: A Practitioner's Guide to Commonly used Theories and Models in Health Promotion*, Don Nutbeam and colleagues indicate that in contemporary health promotion practice, communities are viewed as dynamic systems with inherent strengths and capabilities that can be influenced and supported in ways that will improve health. (18).

#### 4.14 Community



**COMMUNITY**

- May offer resources, social support and tools for health
- But may also reinforce inequalities in society, leaving some people marginalized and disadvantaged

**Notes:**

The community can offer resources, social support and tools that enhance an individual's ability to live a healthy life. On the other hand, the community may also reinforce structural inequalities within society, leaving marginalized individuals and groups in disadvantaged positions.

#### 4.15 Quiz Question

*(Pick One, 10 points, 1 attempt permitted)*

## QUIZ QUESTION

Why is a settings approach important to health promotion?

- A. It helps health promoters understand the dynamics and complex causes of a health issue in a particular location.
- B. Social environments are a key determinant of health.
- C. Physical environments are a key determinant of health.
- D. All of the above.

Correct	Choice
	A. It helps health promoters understand the dynamics and complex causes of a health issue in a particular location.
	B. Social environments are a key determinant of health.
	C. Physical environments are a key determinant of health.
X	D. All of the above.

### Feedback when correct:


That's right! You selected the correct response.

### Notes:

Now, take a moment to reflect on what you have learned about the importance of a settings approach in health promotion by selecting the appropriate answer.

### Correct (Slide Layer)


QUIZ QUESTION

Correct: 

That's right! You selected the correct response!

### Incorrect (Slide Layer)

QUIZ QUESTION

Incorrect: please find the correct answer below 

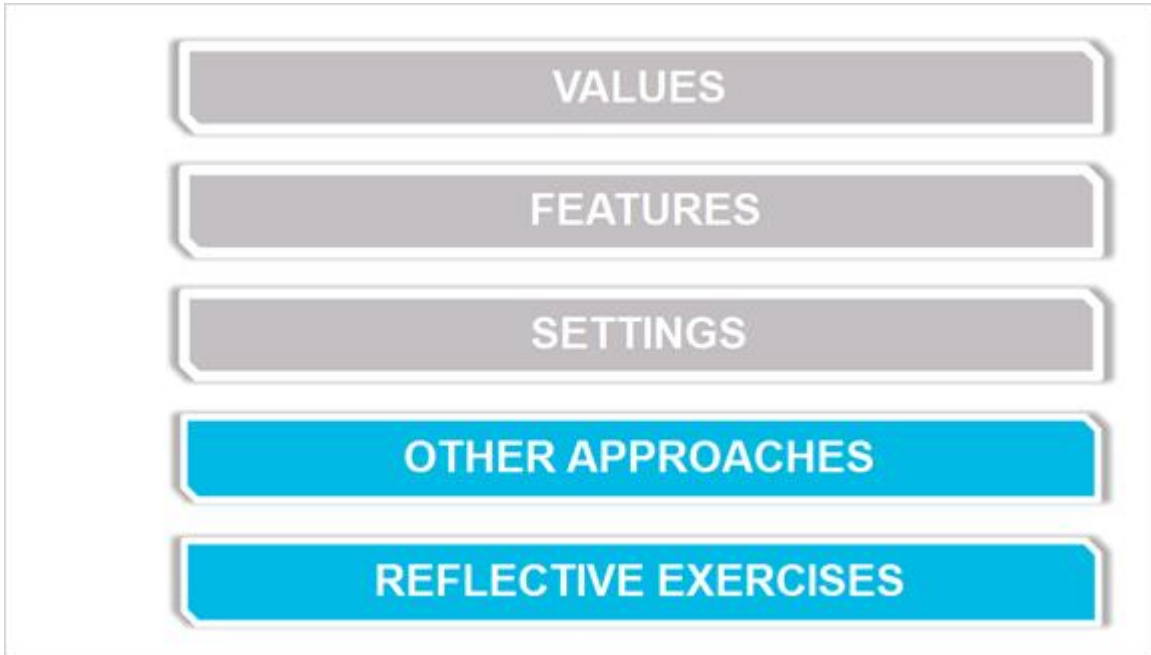
A settings approach in health promotion is important because:

The correct response is:

**D.** All of the above

## 5. Health Promotion Other Approaches

### 5.1 Health Promotion Other Approaches



**Notes:**

In the next section, we will cover some alternative approaches to improving health.

## 5.2 Other Approaches

### OTHER APPROACHES



1. Population Health
2. Disease Prevention
3. Harm Reduction

#### Notes:

Health promotion is not the only approach to changing health status within individuals and communities. The following section describes three others, including:

- Population Health
- Disease Prevention and
- Harm Reduction

### 5.3 Population Health



**Notes:**

In his Dictionary of Public Health, John Last defines population health as ‘the health of the population, measured by health status indicators.’ (19)

He notes that population health is influenced by physical, biological, behavioural, social, cultural, economic, and other factors.

The term may also refer to the health status of a *subset* of the population, or to the level to which the population aspires.



## 5.5 Societal Level Examples

### SOCIETAL LEVEL EXAMPLES



- Increase tobacco taxes
- Regulation of sodium levels
- Bicycle helmet laws

#### Notes:

Societal-level policies such as increasing tobacco taxes, aim to affect the health of entire populations.

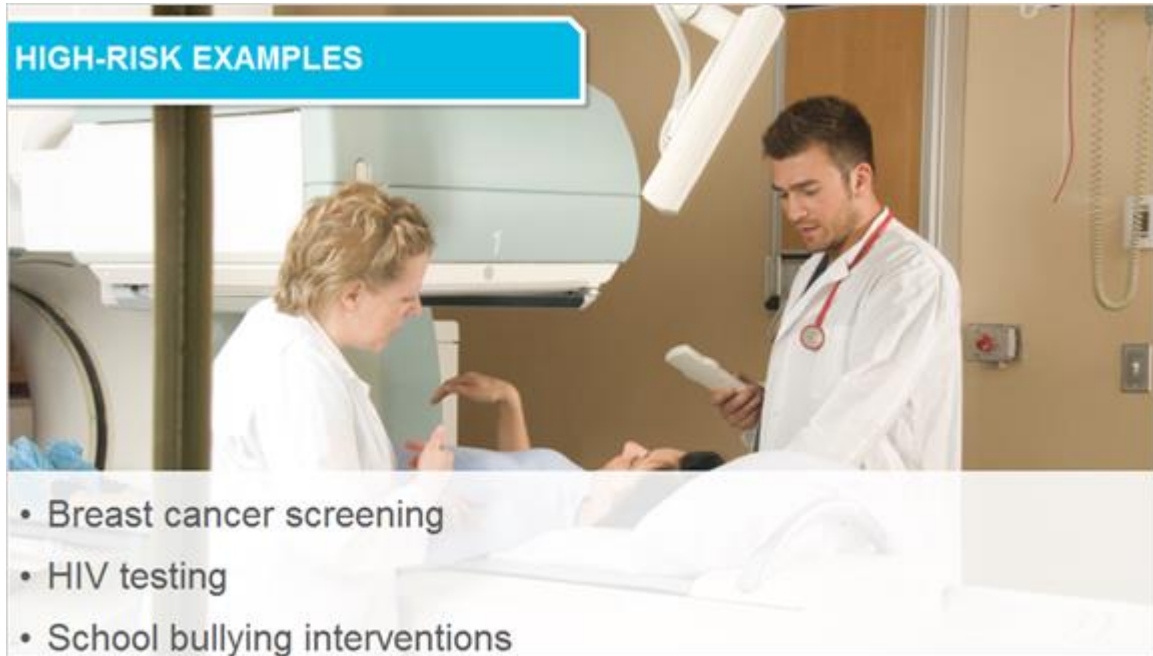
## 5.6 Mass Population Examples



### Notes:

Mass population interventions aim to lower the average level of risk in a population by removing risk factors. A mass-immunization or education campaign is an example of this. This type of approach is often very beneficial to the population as a whole though it may have less impact on an individual level. (20)

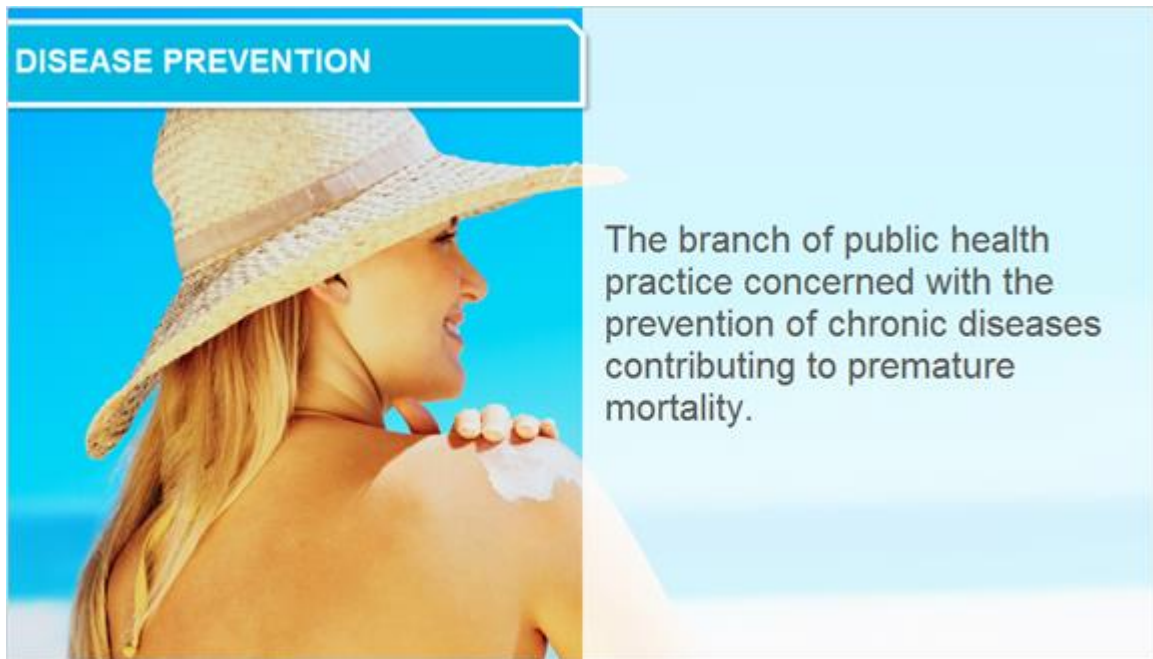
## 5.7 High-risk Examples



### Notes:

High-risk interventions focus on individuals and groups that are most susceptible to a particular health problem or behaviour. This type of intervention usually involves screening to determine risk status and is of most benefit to specific individuals, rather than the population as a whole. (20)

## 5.8 Disease Prevention



### Notes:

Another public health alternative to health promotion is disease prevention.

This approach focuses on preventing chronic diseases such as heart disease, cancer, stroke or diabetes that contribute to premature mortality.

## 5.9 Disease Prevention



**DISEASE PREVENTION**

1. **Primordial prevention:** eliminate predisposing risk factors
2. **Primary prevention:** prevent the occurrence of disease
3. **Secondary prevention:** slow the progress of disease and eliminate if possible
4. **Tertiary prevention:** stop the progress of established disease<sup>19</sup>

### Notes:

In his Dictionary of Public Health, John Last defines four levels of prevention. (19)

**Primordial prevention** works to eliminate predisposing risk factors such as environmental controls, maternal deprivation or illiteracy.

**Primary prevention** includes strategies to prevent disease, such as immunization.

**Secondary prevention** uses screening procedures to detect and treat serious disease as soon as possible.

**Tertiary prevention** is aimed at stopping the progress of established disease. For example, after a heart attack, a patient may undergo cardiac rehabilitation to prevent a relapse.

## 5.10 Health Promotion vs. Disease Prevention



**HEALTH PROMOTION VS. DISEASE PREVENTION**

Similarities:

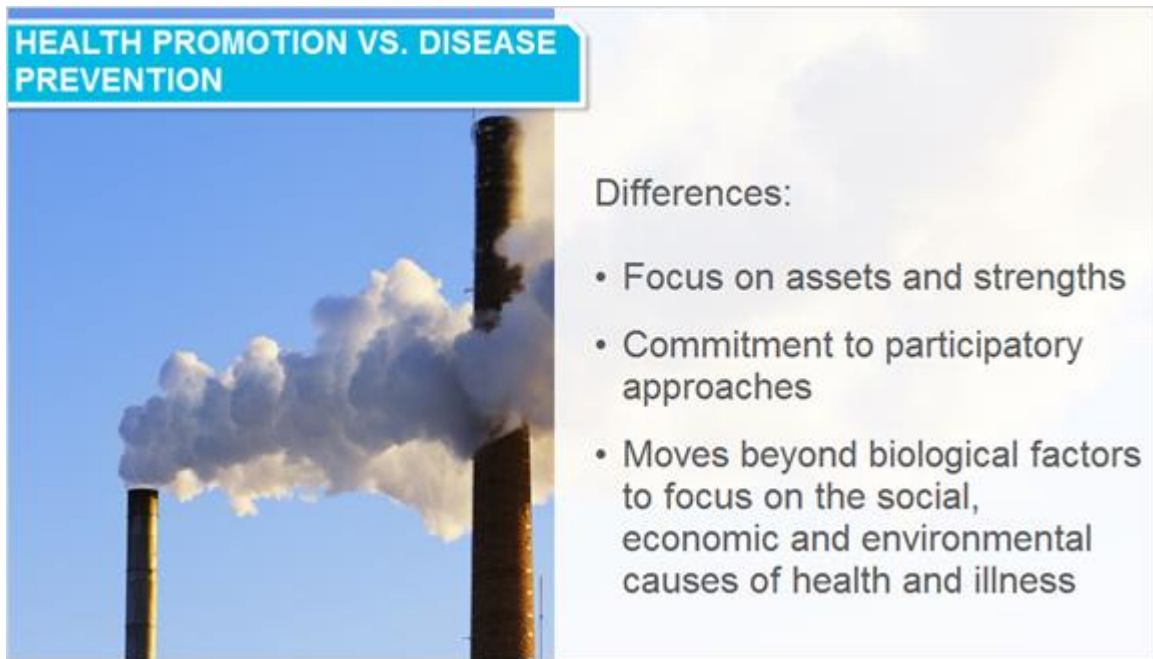
- Focus on prevention of disease
- Similar strategies

The image shows two women in athletic wear performing a yoga pose on a beach. They are standing on their right legs, with their left legs raised and bent at the knee, holding their feet with their hands. Their arms are extended upwards, and their hands are touching at the top. The background is a clear blue sky and the ocean. A blue title box is in the top left corner, and a white text box with a list of similarities is in the bottom left corner.

### Notes:

Health promotion shares many of the same strategies as disease prevention, particularly in the primordial prevention and primary prevention stages.

## 5.11 Health Promotion vs. Disease Prevention



**HEALTH PROMOTION VS. DISEASE PREVENTION**

Differences:

- Focus on assets and strengths
- Commitment to participatory approaches
- Moves beyond biological factors to focus on the social, economic and environmental causes of health and illness

### Notes:

Compared to disease prevention, health promotion tends to focus more on strengths and assets rather than simply risk factors. It also demonstrates a greater commitment to participatory approaches that build the capacity of individuals and communities to address their own health issues. Health Promotion also considers the social, economic and environmental causes of health and illness, and looks beyond the biological aspects of disease.

## 5.12 Health Promotion vs. Disease Prevention



HEALTH PROMOTION VS. DISEASE PREVENTION


- Example: diabetes treatment now involves self-monitoring of blood sugars
- Illustrates a participatory approach, and empowerment

### Notes:

Though these are the traditional differences between health promotion and disease prevention, there are more and more examples of how disease prevention efforts are applying health promotion features and values.

For example, diabetes treatment now involves a patient's self-monitoring of blood sugars. This illustrates a participatory approach, and empowerment of the individual to take control of his or her health condition.

### 5.13 Harm Reduction



HARM REDUCTION

“Any program or policy designed to reduce harm without requiring the cessation of a practice or addiction.”<sup>21</sup>

**Notes:**


Harm reduction, the third alternative approach to health promotion, is defined as any program or policy designed to reduce harm without requiring the cessation of a practice or addiction. (21)

## 5.14 Harm Reduction

### HARM REDUCTION



- Examples: needle exchange programs, condom distribution
- Complements health promotion with empowerment and inclusion values
- Differs in that health promotion is broader than high-risk behaviour



### Notes:

Needle exchange programs are a classic example of harm reduction efforts. Another example is condom distribution to those who are at high risk of unsafe sexual practices.

Harm reduction complements health promotion because it incorporates values such as empowerment and inclusion. The primary difference is that the health promotion lens is generally broader than high-risk behaviour.

## Resources (Slide Layer)

### HARM REDUCTION

Resources:

- [Centre for Addiction and Mental Health](#)
- [Canadian Centre on Substance Abuse](#)
- [National Framework for Action to Reduce the Harms Associated with Alcohol, Other Drugs and Substances in Canada](#)
- [Canadian Harm Reduction Network](#)

### 5.15 Quiz Question

(Pick One, 10 points, 1 attempt permitted)

### QUIZ QUESTION

Which of the following statements about population health is NOT true?

- A.** Common interventions include societal-level policies, mass population interventions and the high-risk approach.
- B.** It refers to the health of the population, measured by health status indicators.
- C.** It is influenced by various concerns including physical, cultural, biological and economic factors.
- D.** It is more focused on communicable disease as opposed to chronic disease.


Correct	Choice
	A. Common interventions include societal-level policies, mass population interventions and the high-risk approach.
	B. It refers to the health of the population, measured by health status indicators.
	C. It is influenced by various concerns including physical, cultural, biological and economic factors.
X	D. It is more focused on communicable disease as opposed to chronic disease.

**Notes:**

Now, take a moment to reflect on what you have learned about other approaches to health. Can you identify which of the following statements about population health is not true?

### Correct (Slide Layer)


**QUIZ QUESTION**

**Correct:** 

That's right! You selected the correct response!

### Incorrect (Slide Layer)

**QUIZ QUESTION**

**Incorrect: please find the correct answer below** 

Which of the following statements about population health is not true?

The correct response is:

**D.** Population health is more focused on communicable disease as opposed to chronic disease

## 5.16 Quiz Question

(Pick One, 10 points, 1 attempt permitted)

**QUIZ QUESTION**

Which of the following statements about disease prevention is NOT true?

- A. Prevention is largely context-based and defined relative to the health condition
- B. Strategies are grounded in medicine and do not take into account factors contributing to disease
- C. Primary prevention includes strategies to prevent disease (ex., use of vaccinations)
- D. While there are differences between disease prevention and health promotion, they share many strategies


Correct	Choice
	A. Prevention is largely context-based and defined relative to the health condition
X	B. Strategies are grounded in medicine and do not take into account factors contributing to disease
	C. Primary prevention includes strategies to prevent disease (ex., use of vaccinations)
	D. While there are differences between disease prevention and health promotion, they share many strategies

Notes:

Which of the following statements is not true about disease prevention?

**Correct (Slide Layer)**


QUIZ QUESTION

Correct: 

That's right! You selected the correct response!

**Incorrect (Slide Layer)**

QUIZ QUESTION

Incorrect: please find the correct answer below 

Which of the following statements is not true about disease prevention?

The correct response is:

**B.** Strategies are grounded in medicine and do not take into account factors contributing to disease

### 5.17 Quiz Question

(Pick One, 10 points, 1 attempt permitted)

**QUIZ QUESTION**

The purpose of harm reduction is to minimize harm to individuals by promoting abstinence of a particular harmful behaviour.

A. True

B. False


Correct	Choice
	A. True
X	B. False

#### Notes:

And finally, consider the following question and select the appropriate answer. TRUE or FALSE: The purpose of harm reduction is to minimize harm to individuals by promoting abstinence of a particular harmful behaviour.

### Correct (Slide Layer)


QUIZ QUESTION

Correct: 

That's right! You selected the correct response!

### Incorrect (Slide Layer)

QUIZ QUESTION

Incorrect: please find the correct answer below 

The purpose of harm reduction is to minimize harm to individuals by promoting abstinence of a particular harmful behaviour.  
The correct response is:

**B.** False

## 6. Reflective Exercises

### 6.1 Reflective Exercises



**Notes:**

In this final section, we will explore several reflective exercises to help solidify your learning.

## 6.2 Stop and Think

STOP AND THINK		
<p>"Health Promotion is the art and science of helping people discover the synergies between their core passions and optimal health, enhancing their motivation to strive for optimal health, and supporting them in changing their lifestyle to move toward a state of optimal health. Optimal health is a dynamic balance of physical, emotional, social, spiritual, and intellectual health. Lifestyle change can be facilitated through a combination of learning experiences that enhance awareness, increase motivation, and build skills and, most important, through the creation of opportunities that open access to environments that make positive health practices the easiest choice."<sup>23</sup></p>	<p>"The process of enabling people to increase control over, and to improve, their health."<sup>1</sup></p>	<p>"Any planned combination of educational, regulatory and organizational supports for actions and conditions of living conducive to the health of individuals, groups and communities."<sup>22</sup></p>
<p>The American Journal of Health Promotion</p>	<p>Ottawa Charter</p>	<p>Green and Kreuter</p>

### Notes:

Please take a moment to reflect on the similarities and differences between these three common health promotion definitions. You will be prompted to record your observations in the next few slides.


### 6.3 Stop and Think

**STOP AND THINK**

1. What similarities do the American Journal of Health Promotion, Ottawa Charter and Green and Kreuter definitions of health promotion share?

REVIEW DEFINITIONS

type your text here



**Notes:**

What similarities do the American Journal of Health Promotion, Ottawa Charter and Green and Kreuter definitions of health promotion share? Once you have typed your response in the space provided, please click on the magnifying glass to reveal our answer to this question.

## Answer (Slide Layer)

### STOP AND THINK

#### OUR ANSWER

**Similarities:**

All definitions encompass the idea of enabling people to take control of their health. They also emphasize multi-faceted and participatory approaches.

Ottawa Charter and AJHP emphasize:

- health as going beyond physical health to a state of well-being or optimal health. This includes physical, mental, social, spiritual, intellectual and emotional well-being;
- enhancement of personal skills and capacities.

Ottawa Charter and AJHP provide a definition of optimal health whereas Green and Kreuter do not.

#### YOUR ANSWER

%TextEntry%

## 6.4 Stop and Think

### STOP AND THINK

2. What are the differences between the American Journal of Health Promotion, Ottawa Charter and Green and Kreuter definitions of health promotion?

type your text here

REVIEW DEFINITIONS

### Notes:

What are the differences between the American Journal of Health Promotion,

Ottawa Charter and Green and Kreuter definitions of health promotion? Once you have typed your response in the space provided, please click on the magnifying glass to reveal our answer to this question.

### Answer (Slide Layer)

**STOP AND THINK**

**OUR ANSWER**

**Differences:**

- Green and Kreuter definition emphasizes the role of the state (or system or organization).
- Green and Kreuter definition emphasizes the role of interventions in health promotion, and creating conducive environments and supports that enable people to achieve health.
- Ottawa Charter states that health promotion is not just the responsibility of the health sector, which the other two don't make explicit.
- Ottawa Charter focuses on health as a resource.
- Green and Kreuter focus on planned supports for individuals/groups/communities.

**YOUR ANSWER**

%TextEntry 1%

## 6.5 Stop and Think

### STOP AND THINK

3. Three health promoters working for different organizations are hired to develop programs to prevent diabetes among low-income, socially isolated seniors.

The American Journal of  
Health Promotion

Ottawa Charter

Green and Kreuter

#### Notes:

Now let's consider how the three definitions of health promotion might differ in terms of application by considering the following scenario.

Three health promoters working for different organizations are hired to develop programs to prevent diabetes among low-income, socially isolated seniors.

One individual accepts The American Journal of Health Promotion definition; the second prefers the Ottawa Charter definition, and the third prefers Green and Kreuter's definition.

How might these definitions affect their approach? Click on each of the definitions in turn, to record your response. When you are finished, click on the magnifying glass to compare your answer to our answer.

## AJHP (Slide Layer)

### STOP AND THINK

OUR ANSWER	YOUR ANSWER
<p>The health promoter using this definition might use strategies that focus on helping this population change their lifestyle. For example, health education techniques could raise awareness about the risk factors for diabetes, and help the seniors make more informed decisions about their health. Skill-building efforts such as cooking and exercise classes might also be applied.</p>	<p>%TextEntry9%</p> <p>REVIEW DEFINITIONS</p>

The American Journal of Health Promotion      Ottawa Charter      Green and Kreuter

## Ottawa (Slide Layer)

### STOP AND THINK

OUR ANSWER	YOUR ANSWER
<p>The health promoter using this definition might use strategies that focus on creating a supportive environment that enables seniors to improve their health and prevent diabetes. For example, community members might be mobilized to support the seniors by raising funds to subsidize a weekly bus trip to a local market where they could socialize as well as buy affordable, nutritious food.</p>	<p>%TextEntry10%</p> <p>REVIEW DEFINITIONS</p>

The American Journal of Health Promotion      Ottawa Charter      Green and Kreuter

## Green (Slide Layer)

### STOP AND THINK

OUR ANSWER	YOUR ANSWER
<p>The health promoter using this definition might focus on policy or organizational changes that would support health over the long term. Examples of this might include advocating for policies to subsidize nutritious foods, or enhance walkability of streets where isolated seniors live.</p>	<p>%TextEntry11%</p> <p>REVIEW DEFINITIONS</p>


The American Journal of Health Promotion      Ottawa Charter      Green and Kreuter

## 6.6 Review

### REVIEW

**Learning Objective #1:**  
**Define health promotion.**

In Canada, the Ottawa Charter drives health promotion practice. That is, the process of enabling people to increase control over, and to improve their health.



### Notes:

This brings us to the end of Module One: Definitions and Concepts. We began

this module by outlining three learning objectives.

The first indicated that by the end of this module, you would be able to define health promotion.

We have now learned that in Canada, the Ottawa Charter drives health promotion practice. That is, the process of enabling people to increase control over, and to improve their health.

## 6.7 Review

**REVIEW**

**Learning Objective #2:**  
**Describe the key features and values that shape health promotion practice.**

Health promotion values include: empowerment; social justice and equity; inclusion; and respect.

Health promotion practitioners focus on a holistic view of health; participatory approaches; the broad social determinants of health; building on existing strengths and assets; and the use of multiple strategies.



### Notes:

Our second learning objective indicated that by the end of this module, you would be able to describe the key features and values that shape health promotion practice.

In this module we learned that health promotion values include: empowerment; social justice and equity; inclusion; and respect.

We also learned that health promotion features include a focus on: a holistic view of health; participatory approaches; the broad social determinants of health; building on existing strengths and assets; and the use of multiple strategies.

## 6.8 Review

**REVIEW**

**Learning Objective #3:  
Distinguish health promotion  
from related concepts.**

Health promotion shares characteristics with other models such as disease prevention, population health and harm reduction.

However, health promotion focuses more on strengths and assets than risk factors, shows a commitment to building capacity through participation, and looks beyond the biological aspects of disease to social, economic and environmental causes.




### Notes:

Our third and final learning objective indicated that by the end of this module, you would be able to distinguish health promotion from related concepts.

In this module we learned that health promotion shares characteristics with other models such as disease prevention, population health and harm reduction. We also learned how health promotion differs from these models. Health promotion tends to focus more on strengths and assets rather than risk factors, shows a commitment to building capacity through participation, and looks beyond the biological aspects of disease to social, economic and environmental causes.

## 6.9 PHO Health Promotion Capacity Building



PHO Health Promotion  
Capacity Building

For service request inquiries, including consultations, webinars, workshops, or to sign up for our mailing list, please go to:

<http://www.publichealthontario.ca/en/ServicesAndTools/HealthPromotionServices/Pages/service-request-form.aspx>

Our events calendar is at:


<http://www.publichealthontario.ca/en/LearningAndDevelopment/Events/Pages/default.aspx>

### Notes:

This resource supported and maintained by the health promotion capacity building team at Public Health Ontario. We offer a variety of health promotion services including consultations, webinars, face to face workshops and resources related to health promotion planning, evaluation, health communication and building healthy public policy.


To request support or find more information please follow the links on this slide.

## 6.10 Thank you



# Thank you

Please wait while your completion status is being submitted.



[Click here to provide feedback.](#)

You have successfully completed this module. You can go back to the Health Promotion course page to generate the certificate of completion.

[← PREV](#) [← FINISH](#)

### Notes:




Thank you for participating in Module One: Definitions and Concepts, part of our Health Promotion Foundations course.

Please take a few minutes to provide your feedback on this module and the content we have covered.

## 7. Help Tab

### 7.1 Navigation Menu

#### NAVIGATION MENU

-  Resource icon: click this icon for further reading
-  Compare Answers Button: click this button to see our response to the exercise
-  Close Button: clicking on the 'X' button will close any window

## 8. Definitions

### 8.1 Definitions

DEFINITIONS		
<p>"Health Promotion is the art and science of helping people discover the synergies between their core passions and optimal health, enhancing their motivation to strive for optimal health, and supporting them in changing their lifestyle to move toward a state of optimal health. Optimal health is a dynamic balance of physical, emotional, social, spiritual, and intellectual health. Lifestyle change can be facilitated through a combination of learning experiences that enhance awareness, increase motivation, and build skills and, most important, through the creation of opportunities that open access to environments that make positive health practices the easiest choice."</p>	<p>"The process of enabling people to increase control over, and to improve, their health."</p>	<p>"Any planned combination of educational, regulatory and organizational supports for actions and conditions of living conducive to the health of individuals, groups and communities."</p>
<p>The American Journal of Health Promotion</p>	<p>Ottawa Charter</p>	<p>Green and Kreuter</p>