

# Module 7

## Values

### Introduction

You will get the opportunity to examine the key values underpinning health promotion to which you were initially introduced in Module 1. This module includes a case study illustrating the ways in which these values are incorporated into health promotion practice and an instrument assessing the extent to which programs and policies incorporate values.

You will have the opportunity to explore six sections in this module.

#### **Introduction**

#### **Learning Outcomes**

#### **Reflective Exercise: Considering your Values**

#### **Content Discussion**

- Defining Values
- Four Key Values
- A Value-Based Reflection Tool
- Case Study: The Media Arts Program

#### **Reflective Exercise: Using the Inclusion Lens in your Workplace**

#### **Readings and Resources**

# Learning Outcomes

By the end of this module, you will:

- describe, and make distinctions between, key health promotion values;
- understand how these values influence the approaches used by health promoters to enable individuals, groups and communities to take action on the factors contributing to their health;
- be able to identify the extent to which policies and programs developed in response to community health needs reflect health promotion values; and
- assess the application of health promotion values in the planning and implementation of a program or policy in your community or organization.

# **Reflective Exercise**

## **Considering Your Values**

Before you start working through this module, consider the following questions and contribute to your Reflective Journal.

### **Points to Ponder**

Choose a health promotion program or policy currently in place in your community or organization.

1. To what extent does this initiative incorporate key health promotion values?
2. What are those values?
3. Which of this module's learning outcomes is most important for you? Why?

# Content Discussion

## Defining Values

The Concise Oxford Dictionary defines **a value** as

**“the worth, desirability or quality of thing or the qualities on which these depend (the value of regular exercise)” (1990, p. 1356).**

Everyone is guided by a set of values, which shape our judgments about what's important and influence the choices we make.

As is the case with any 'helping profession', health promotion is not value neutral. It is defined by a distinct set of values that guide the ways in which health promoters work with individuals, groups and communities to address health issues.

In this module, you will be exploring the following set of four values.

- Empowerment
- Social justice and equity
- Inclusion
- Respect

## Four Key Values

### Empowerment

Empowerment is a process through which people gain **greater control** over the decisions and actions affecting their health (Nutbeam, 1998). Empowerment has been identified as health-enhancing (Wallerstein, 1993; Labonte, 1994; Rissel, 1994).

Wallerstein (1993) identifies three conditions related to empowerment and health:

- social networks
- community participation
- community competence.

Assessments of community interventions promoting these conditions have identified a number of positive health impacts including increased levels of social support, enhanced coping capacities, increased life satisfaction and decreased susceptibility to illness (Minkler, 1997; Fawcett et al., 2001).

## Social Justice and Equity

A large body of research has shown that poverty and income inequality are the greatest causes or **determinants of health status**. Simply put, low-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 (Second Report on Health of Canadians, 1999).

Accordingly, health promotion practice reflects a concern with social justice to ensure that everyone has **equitable access** to food, income, employment, shelter, education and other factors needed to maintain good health.

## Inclusion

Inclusion is a term familiar to most of us in our everyday lives; at some point, we have all felt included or excluded from our social networks or communities. People who are excluded due to poverty, ill health, gender, race, disability or lack of education do not have the opportunity to reap the health, social and economic benefits of full participation in society.

To ensure that everyone has access to the resources needed to maintain good health as well as a voice in the decisions affecting their health, health promotion practice emphasizes inclusion by working with members of **marginalized groups** in the community who face **systemic barriers** to good health.

## Respect

Health promotion embodies and respects a diverse range of viewpoints, cultures and perspectives on health and wellness. Respecting diversity is an important **prerequisite** for building **sustainable relationships** as the basis for actions to achieve shared goals.

## A Value-Based Reflection Tool

### The Inclusion Lens

A lens is an aid for you to improve vision. It can also provide you with a new way of looking at the root causes of ill health, such as poverty, disability and discrimination.

Developed by Malcolm Shookner (2003), the Inclusion Lens provides a value-based reflection tool. It is designed for use by policy makers, program planners and community leaders in the public and not-for-profit sectors.

The Inclusion Lens is a tool for analyzing legislation, policies, programs and practices to determine the extent to which they promote the social and economic inclusion of individuals, families and communities. The content of the Inclusion Lens instrument

makes it a useful tool for analyzing the extent to which policies, programs and practices incorporate the key health promotion values of:

- empowerment
- social justice
- inclusion
- respect

The Inclusion Lens assesses the extent to which a human service initiative reflects these values by posing a number of questions for you to take into account. The questions are presented as a checklist.

### **The Inclusion Lens Checklist**

- How will the policy or program increase or decrease discrimination on the basis of gender, race, age, disability, culture or ethnicity, etc.?
- How will the policy or program increase or decrease personal income and resources available for people to participate in social and economic activity and promote income equity?
- How will the policy or program increase or decrease isolation and access to resources?
- How will the policy or program increase or decrease opportunities for participation in decision making?
- How will the policy or program add or remove barriers to common spaces, safe environments and social interaction?
- How will the policy or program compromise the rights of individuals?
- How will the policy or program increase or decrease opportunities for personal development and social support?
- How will the policy or program increase or reduce access to resources and programs for excluded groups?

Source: Shookner, 2003

# Case Study

## The Media Arts Program

### The Challenge

This case presents an opportunity for you to consider how others put values into practice.

Built in the 1940s, Regent Park in Toronto is Canada's oldest and largest low-income public housing community. This culturally diverse community is home to 12,000 people.

Regent Park is among the poorest communities in Canada, with residents reporting an average income that is approximately half the average income for the rest of Toronto. More than 70% of Regent Park residents are visible minorities. Over half of the population of Regent Park consists of children under the age of eighteen.

Community residents face many systemic barriers to good health, of which poverty, unemployment, discrimination, gang violence, substance abuse and a general sense of hopelessness are but a few. It was determined that a comprehensive approach that engaged young people in identifying and addressing their own health and educational needs was required.

### Action Taken

Introduced in 1994, the Media Arts program is an ongoing, skill-building initiative for young people living in Regent Park. Sponsored by Regent Park FOCUS, a community-based, substance abuse prevention project funded by the Ontario Ministry of Health and Long-Term Care, the program provides a range of learning experiences for young people in the media arts field.

Participants apply their skills to developing communication materials focusing on issues that are important to them and their community. Components of the program include:

- *Catch da Flava Newspaper*, an on-line community newspaper produced by participants (see <http://www.catchdaflava.com/>);
- *Catch da Flava*, a bi-monthly radio program produced by participants and broadcast live from Regent Park. The purpose of the radio program is to take the "power of voice" held by the mainstream media and to place it in the hands of youth. Like many low-income, marginalized communities, Regent Park suffers from negative stereotypes perpetuated by the media. The radio show provides young people from Regent Park with an opportunity to dispel myths about their community and give a more realistic account;

- *Exploring Youth Experiences (EYE) video productions*, which provides participants with the skills, resources and infrastructure to produce high-quality videos and films reflecting their diverse experiences in the community. To date, the films and videos produced by EYE tackle issues like substance abuse, teen sexuality, advertising, graffiti, violence and other social issues affecting young people in the community. Videos produced by EYE have been shown and distributed to schools, libraries and community groups across Toronto and beyond;
- *EYE video CED*, a community economic development initiative employing community youth on a fee-for-service basis to produce videos; and
- *Studio for Photography Arts*, which provides young people with opportunities to work with, and learn from, professional photographers.

### **Implications for Practice**

Consider how the media arts program incorporates the key values of health promotion practice:

**Empowerment** – The project facilitates the process of empowerment by equipping young people with the knowledge, skills, capacities and resources they need to express their views in a positive way and to take action on the health issues affecting their community.

**Equity and Social Justice** – The project provides young people from low-income families with opportunities and resources they would not otherwise be able to access. As a result, participants gain marketable skills that can open doors to future educational and career opportunities.

**Inclusion** – The project reduces feelings of social isolation and marginalization among young people by validating their input and opinions and giving them opportunities to express themselves in creative ways.

**Respect** – By bringing together young people from a variety of ethno-racial backgrounds, the media arts program helps them to understand and respect a diverse range of cultures and views.

The Media Arts program has been widely acknowledged for its best practices in engaging young people and continues to serve as a model program for health promotion and substance abuse prevention. The comprehensive approach adopted by the project and the active involvement of young people are aspects of the project which are integral to its success.

# **Reflective Exercise**

## **Using the Inclusion Lens in your Workplace**

Think about your learning, consider these questions and compare your thoughts now with those you described in your Journal notes when you completed the Reflective Exercise at the beginning of this module.

### **Points to Ponder**

Choose a health promotion program or policy currently in place in your community or organization.

1. Using the Inclusion Lens questions, assess the extent to which this initiative incorporates key health promotion values.
2. How could the program or policy be modified to make it more compatible with health promotion values?

## Readings and Resources

You can find out more about health promotion values at these **online resources**.

Health Canada. **Health Promotion in Canada: A Case Study**. Ottawa: Minister of Public Works and Government Services, 1997.

<http://www.hc-sc.gc.ca/hppb/healthpromotiondevelopment/pube/hprpte.pdf>

Nutbeam, D. **Health Promotion Glossary**. World Health Organization: Geneva, 1998.

<http://www.who.int/hpr/support.material.shtml>

Shookner, M. "An inclusion lens." **Ontario Health Promotion Email Bulletin #298.1**, February 21, 2003.

[http://www.ohpe.ca/ebulletin/ViewFeatures.cfm?ISSUE\\_ID=298&startrow=61](http://www.ohpe.ca/ebulletin/ViewFeatures.cfm?ISSUE_ID=298&startrow=61)

For those of you who may want more information on health promotion values, **these additional printed materials** may be of interest. If they are not available at your local library, you could consider requesting them through Inter Library Loan.

Airhihenbuwa, C.O. **Health and Culture: Beyond the Western Paradigm**. Thousand Oaks, California: Sage, 1995.

Huff, R.M., and Kline, M.V. **Promoting Health in Multicultural Populations: A Handbook for Practitioners**. Thousand Oaks, California: Sage, 1999.

Labonte, R. "Health promotion and empowerment: reflections on professional practice." **Health Education Quarterly** 21 (2), 253-268, 1994.

Minkler, M. (Ed.), **Community Organizing and Community Building for Health**. New Brunswick, New Jersey: Rutgers University Press, 88-102, 1997.

Raeburn, J., and Rootman, I. **People-Centred Health Promotion**. Toronto: Wiley, 1997.

Rissel, C. "Empowerment: the holy grail of health promotion?" **Health Promotion International** 9 (1), 39-47, 1994.

Seedhouse, D. **Health Promotion: Philosophy, Prejudice and Practice**. Chichester: John Wiley and Sons, 1997.

Wallerstein, N. "Empowerment and health : theory and practice of community Change". **Community Development Journal** 28 (3), 218-227, 1993.